

Union Calendar No. 671

98th Congress, 2d Session - - - - - House Report 98-1188

ACTIVITIES REPORT

OF THE

COMMITTEE ON VETERANS' AFFAIRS HOUSE OF REPRESENTATIVES

NINETY-EIGHTH CONGRESS

FIRST SESSION

Convened January 3, 1983

Adjourned November 18, 1983

SECOND SESSION

Convened January 23, 1984

Adjourned October 12, 1984



JANUARY 2, 1985.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE

WASHINGTON : 1985

40-795 O

H763-7

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LETTER OF SUBMITTAL

HOUSE OF REPRESENTATIVES,
COMMITTEE ON VETERANS' AFFAIRS,
Washington, DC, January 2, 1985.

Hon. BENJAMIN J. GUTHRIE,
Clerk, House of Representatives,
Washington, DC.

DEAR MR. GUTHRIE: In accordance with section 118 of the Legislative Reorganization Act of 1970, as amended (Rule XI of the Rules of the House of Representatives), I submit herewith the report of the Committee on Veterans' Affairs setting forth its activities in reviewing and studying the application, administration, and execution of those laws, the subject matter of which is within the jurisdiction of our Committee.

Sincerely,

G.V. (SONNY) MONTGOMERY,
Chairman.

(v)

FOREWORD

The 98th Congress was very productive in maintaining and improving an ongoing program of benefits and services for our veterans. The Committee saw an urgent need to get thousands of veterans out of the unemployment lines and back into productive jobs with the enactment of the Emergency Veterans' Job Training Act. In addition, the Veterans' Readjustment Appointment Program was extended to enable additional Vietnam-era and disabled veterans to obtain Federal employment at a higher entrance level.

The highly successful readjustment counseling program continues to offer assistance to those veterans who are experiencing difficulties in readjusting to civilian life following service or who simply need to meet and share with others who have undergone similar circumstances. The program was extended for an additional four years.

The question of the effect of exposure to Agent Orange of veterans who served in Vietnam continues to be an emotional issue that the Congress has addressed with sensitivity and reason. In the 97th Congress, priority medical care was authorized for these veterans. The 98th Congress continued to respond by offering a disability allowance to certain veterans who may have been adversely affected by such exposure. We started a formal procedure to determine whether disabilities may have resulted from exposure to herbicides.

The Committee is also facing the issue of health problems of veterans which may be the result of exposure to low-level ionizing radiation while participating in the testing of nuclear devices while in service. Medical care is also provided for veterans exposed to radiation on the same basis as for veterans exposed to Agent Orange. Also, the 98th Congress established a formal procedure for deciding compensation claims based on radiation exposure.

The Congress gave its approval to a health care bill that provides improved and expanded treatment services for Vietnam veterans suffering from post-traumatic stress disorder and authorized a major nationwide study, now well underway, of the disorder.

We saw the enactment of a new GI education assistance measure and an increase in the rates paid under the Vietnam-era GI bill.

Checks for service-connected disabled veterans receiving compensation and for widows and children receiving DIC rose twice in 1984 as a result of cost-of-living increases authorized by the Committee. The non-service-connected pension program is indexed with Social Security. These individuals received increases in December of 1983 and 1984.

There were increases in the housing and automobile grants for severely-disabled service-connected veterans.

This legislation, as well as the framework for future legislation, was established due to the concern of the Congress and, more importantly, due to the input of the veteran population.

Through hearings in Washington, as well as field hearings and veterans' forums conducted in various States, the Committee received testimony which enabled us to be more effective in enacting legislation responsive to veterans.

Special thanks are in order for my distinguished colleagues who guided and developed the key measures from thought to implementation. I could not have asked for better cooperation nor more energetic efforts from the Committee members, especially our Subcommittee Chairmen—Hon. Bob Edgar, Chairman, Subcommittee on Hospitals and Health Care; Hon. Douglas Applegate, Chairman, Subcommittee on Compensation, Pension and Insurance; Hon. Marvin Leath, Chairman, Subcommittee on Education, Training and Employment; and Hon. Richard C. Shelby, Chairman, Subcommittee on Housing and Memorial Affairs.

Special appreciation goes to Congressman John Paul Hamerschmidt, the ranking minority member of the Committee, and the ranking minority members of the subcommittees—Hon. Elwood Hillis, Hon. Bob McEwen, Hon. Gerald B.H. Solomon, and Hon. Christopher H. Smith—for their care in helping to sustain the non-partisan atmosphere of the Committee's work. I am grateful for the opportunity of working so closely with such concerned and dedicated individuals.

Finally, I want to extend my appreciation to the Committee staff for their hard work and dedication to our Nation's veterans.

The Office of Management and Budget has plans to recommend to the President that certain veteran benefits and services be reduced or possibly terminated during the next 4 years.

This Committee and the veteran population it serves recognizes the fact that we must share in the responsibility of trimming a monstrous deficit. We have done so by accepting some cuts in VA budgets during the past few years, but we will protect our veterans' health care system.

With the surge in the number of veterans age 65 and older now upon us, our only consideration should be the level of *increase* in health care. In the coming Congress, our top priority should be to protect programs now available to veterans to maintain current services, and to build upon a firmly established foundation of health care delivery in order to meet the coming challenge.

Because of our veterans, because of their service and their sacrifices, not only do we have freedom, we have the foundation and the hope for an enduring peace. This Committee will continue to offer meaningful and responsible legislation to repay a portion of this great debt.

It is my hope that the following pages convey our sincerity in fulfilling this commitment.

G.V. (SONNY) MONTGOMERY,
Chairman.

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98TH CONGRESS }
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HOUSE OF REPRESENTATIVES

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JANUARY 2, 1985.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. MONTGOMERY, from the Committee on Veterans' Affairs,
submitted the following

REPORT

PROVISION OF THE RULES OF THE HOUSE OF REPRESENT- ATIVES APPLICABLE TO COMMITTEE ACTIVITIES—JU- RISDICTION OF THE HOUSE COMMITTEE ON VETERANS' AFFAIRS

RULE X

HOUSE RULES ON JURISDICTION

Rule X of the Rules of the House of Representatives established the standing committees of the House and their jurisdiction. Under that rule, all bills, resolutions, and other matters relating to the subjects within the jurisdiction of any standing committee shall be referred to such committee. Rule X.1.(u) established the jurisdiction of the Committee on Veterans' Affairs as follows:

- (1) Veterans' measures generally.
- (2) Cemeteries of the United States in which veterans of any war or conflict are or may be buried, whether in the United States or abroad, except cemeteries administered by the Secretary of the Interior.
- (3) Compensation, vocational rehabilitation, and education of veterans.
- (4) Life insurance issued by the Government on account of service in the Armed Forces.
- (5) Pensions of all the wars of the United States, general and special.
- (6) Readjustment of servicemen to civil life.

(7) Soldiers' and sailors' civil relief.

(8) Veterans' hospitals, medical care, and treatment of veterans.

This committee was established January 2, 1947, as a part of the Legislative Reorganization Act of 1946 (60 Stat. 812), and was vested with jurisdiction formerly exercised by the Committee on World War Veterans' Legislation (VII, 2077); Invalid Pensions (IV, 4258); and Pensions (IV, 4260). Jurisdiction over veterans' cemeteries administered by the Department of Defense was transferred from the Committee on Interior and Insular Affairs on October 20, 1967, by H. Res. 241, 90th Cong. Vocational rehabilitation except that pertaining to veterans is under the jurisdiction of the Committee on Education and Labor. The Committee has jurisdiction over bills to amend the Soldiers and Sailors Civil Relief Act of 1940 to permit certain declarations of fact in lieu of affidavits (Feb. 4, 1959, p. 1812), and over bills to amend the Servicemen's and Veterans' Survivor Benefits Act re service-connected deaths of retired members of the uniformed services (May 18, 1959, p. 8273).

COMMITTEE RULES OF PROCEDURE OF THE 98TH CONGRESS

ADOPTED FEBRUARY 1, 1983

Rule I—General Provisions

The Rules of the House are the rules of the committee and subcommittees so far as applicable, except that a motion to recess from day to day is a motion of high privilege in committees and subcommittees. Each subcommittee of the committee is a part of the committee, and is subject to the authority and direction of the committee and to its rules so far as applicable.

Rule II—Meetings

(a) The regular meeting day for the full committee shall be at 10 a.m. on the second Tuesday of each month, and at such other times and in such places as the chairman may designate; however, a regular Tuesday meeting of the committee may be dispensed with by the chairman.

(b) The chairman may call and convene, as he considers necessary, additional meetings of the committee for the consideration of any bill or resolution pending before the committee or for the conduct of other committee business. The committee shall meet for such purpose pursuant to the call of the chairman.

(c)(1) Each meeting for the transaction of business, including the markup of legislation, of the committee or each subcommittee thereto shall be open to the public except when the committee or subcommittee, in open session and with a quorum present, determines by roll call vote that all or part of the remainder of the meeting on that day shall be closed to the public: *Provided, however,* That no person other than members of the committee and such congressional staff and such departmental representatives as they may authorize shall be present at any business or markup session which has been closed to the public. This paragraph does not apply to subparagraph (2) of this paragraph, or to any meeting that relates solely to internal budget or personnel matters.

(2) Each hearing conducted by the committee or each subcommittee thereof shall be open to the public except when the committee or subcommittee, in open session and with a quorum present, determines by roll call vote that all or part of the remainder of that hearing on that day shall be closed to the public because disclosure of testimony, evidence, or other matters to be considered would endanger the national security or would violate any law or rule of the House of Representatives: *Provided, however,* That the committee or subcommittee may by the same procedure vote to close one subsequent day of hearing.

Rule III—Records and Rollcalls

There shall be kept in writing a record of the proceedings of the committee and of each subcommittee, including a record of the votes on any question on which a roll call is demanded. The result of each such roll call vote shall be made available by the committee for inspection by the public at reasonable times in the offices of the committee. Information so available for public inspection shall include a description of the amendment, motion, order or other proposition and the name of each member voting for and each member voting against such amendment, motion, order, or proposition, and the names of those members present but not voting. A record vote may be demanded by one-fifth of the members present or, in the apparent absence of a quorum, by any one member. With respect to each record vote by the committee to report any bill or resolution, the total number of votes cast for and the total number of votes cast against the reporting of such bill or such resolution shall be included in the committee report.

Rule IV—Quorums

A majority of the members of the committee shall constitute a quorum of the committee for business and a majority of the members of any subcommittee shall constitute a quorum thereof for business: *Provided,* That any two members shall constitute a quorum for the purpose of taking testimony and receiving evidence.

Rule V—Hearing Procedures

(a) The chairman, in the case of hearings to be conducted by the committee, and the appropriate subcommittee chairman, in the case of hearings to be conducted by a subcommittee, shall make public announcement of the date, place, and subject matter of any hearing to be conducted on any measure or matter at least one week before the commencement of that hearing unless the committee determines that there is good cause to begin such hearing at an earlier date. In the latter event, the chairman or the subcommittee chairman, whichever the case may be, shall make such public announcement at the earliest possible date. The clerk of the committee shall promptly notify the Daily Digest Clerk of the Congressional Record as soon as possible after such public announcement is made.

(b) So far as practicable, each witness who is to appear before the committee or a subcommittee shall file with the clerk of the committee, at least 48 hours in advance of his or her appearance, a

written statement of his or her proposed testimony and shall limit his or her oral presentation to a summary of the statement.

(c) When any hearing is conducted by the committee or any subcommittee upon any measure or matter, the minority party members on the committee shall be entitled, upon request to the chairman of a majority of those minority members before the completion of such hearing, to call such witnesses selected by the minority to testify with respect to that measure or matter during at least one day of hearing thereon.

(d) All other members of the committee may have the privilege of sitting with any subcommittee during its hearing or deliberations and may participate in such hearings or deliberations, but no such member who is not a member of the subcommittee shall vote on any matter before such subcommittee.

(c) Committee members may question witnesses only when they have been recognized by the chairman for that purpose, and only for a 5-minute period until all members present have had an opportunity to question a witness. The 5-minute period for questioning a witness by any one member can be extended only with the unanimous consent of all members present. The questioning of witnesses in both full and subcommittee hearings shall be initiated by the chairman, followed by the ranking minority party member and all other members alternating between the majority and minority. In recognizing members to question witnesses in this fashion, the chairman shall take into consideration the ratio of the majority to minority members present and shall establish the order of recognition for questioning in such a manner as not to disadvantage the members of the majority.

Rule VI—Oversight

(a) In order to assist the House in:

(1) Its analysis, appraisal, and evaluation of (A) the application, administration, execution, and effectiveness of the laws enacted by the Congress, or (B) conditions and circumstances which may indicate the necessity or desirability of enacting new or additional legislation, and

(2) its formulation, consideration and enactment of such modifications or changes in those laws, and of such additional legislation, as may be necessary or appropriate, the various subcommittees, consistent with their jurisdiction as set forth in Rule VIII, shall have oversight responsibilities as provided in paragraph (b).

(b) Each subcommittee shall review and study, on a continuing basis, the application, administration, execution, and effectiveness of those laws, or parts of laws, the subject matter of which is within the jurisdiction of that subcommittee, and the organization and operation of the Federal agencies and entities having responsibilities in or for the administration and execution thereof, in order to determine whether such laws and the programs thereunder are being implemented and carried out in accordance with the intent of the Congress and whether such programs should be continued, curtailed, or eliminated.

In addition, each such subcommittee shall review and study any conditions or circumstances which may indicate the necessity or de-

sirability of enacting new or additional legislation within the jurisdiction of that subcommittee (whether or not any bill or resolution has been introduced with respect thereto), and shall on a continuing basis undertake future research and forecasting on matters within the jurisdiction of that subcommittee.

(c) Each subcommittee shall review and study on a continuing basis the impact or probable impact of tax policies affecting subjects within its jurisdictions.

Rule VII—Broadcasting of Committee Hearings

Broadcasting, either by radio or TV of all open committee hearings and meetings shall be permitted when, in the judgment of the chairman, in consultation with the ranking minority member, such action is warranted. Photographs shall be permitted during hearings of the full committee and subcommittees as the chairman decides.

All coverage shall be subject to the following provisions:

(1) If the television or radio coverage of the hearing or meeting is to be presented to the public as live coverage, that coverage shall be conducted and presented without commercial sponsorship.

(2) No witness served with a subpoena by the committee shall be required against his or her will to be photographed at any hearing or to give evidence or testimony while the broadcasting of that hearing, by radio or television, is being conducted. At the request of any such witness who does not wish to be subjected to radio, television, or still photography coverage, all lenses shall be covered and all microphones used for coverage turned off.

(3) Not more than four television cameras, operating from fixed positions, shall be permitted in a hearing or meeting room. The allocation among the television media of the positions of the number of television cameras permitted in a hearing or meeting room shall be in accordance with fair and equitable procedures devised by the Executive Committee of the Radio and Television Correspondents' Galleries.

(4) Television cameras shall be placed so as not to obstruct in any way the space between any witness giving evidence or testimony and any member of the committee or the visibility of that witness and that member to each other.

(5) Television cameras shall not be placed in positions which obstruct unnecessarily the coverage of the hearing or meeting by other media.

(6) Equipment necessary for coverage by the television and radio media shall not be installed in, or removed from, the hearing or meeting room while the committee is in session.

(7) Floodlights, spotlights, strobелights, and flashguns shall not be used in providing any method of coverage of the hearing or meeting, except that the television media may install additional lighting in the hearing or meeting room, without cost to the Government, in order to raise the ambient lighting level in the hearing or meeting room to the lowest level necessary to provide adequate television coverage of the hearing or meeting at the then current state of the art of television coverage.

(8) Not more than five press photographers shall be permitted to cover a hearing or meeting by still photography. In the selection of these photographers, preference shall be given to photographers from Associated Press Photos and United Press International Newspictures. If request is made by more than five of the media for coverage of the hearing or meeting by still photography, that coverage shall be made on the basis of a fair and equitable pool arrangement devised by the Standing Committee of Press Photographers.

(9) Photographers shall not position themselves, at any time during the course of the hearing or meeting, between the witness table and the members of the committee.

(10) Photographers shall not place themselves in positions which obstruct unnecessarily the coverage of the hearing by the other media.

(11) Personnel providing coverage by the television and radio media shall be then currently accredited to the Radio and Television Correspondents' Galleries.

(12) Personnel providing coverage by still photography shall be then currently accredited to the Press Photographers' Gallery.

(13) Personnel providing coverage by the television and radio media and by still photography shall conduct themselves and their coverage activities in an orderly and unobtrusive manner.

Rule VIII—Number and Jurisdiction of Subcommittees

(a) There shall be five standing subcommittees as follows: Oversight and Investigations; Hospitals and Health Care; Education, Training and Employment; Compensation, Pension and Insurance; and Housing and Memorial Affairs. All proposed legislation and other matters related to the subcommittees listed under standing subcommittees named below shall be referred to such subcommittees, respectively;

Oversight and Investigations: Investigative authority over matters that are referred to the subcommittee by the chairman of the full committee for investigation and appropriate recommendations.

Hospitals and Health Care: Veterans' hospitals, medical care, and treatment of veterans.

Education, Training and Employment: Education of veterans, vocational rehabilitation, and readjustment of servicemen to civilian life.

Compensation, Pension and Insurance: Compensation, pensions of all the wars of the United States, general and special, and life insurance issued by the Government on account of service in the Armed Forces.

Housing and Memorial Affairs: Veterans' housing programs, and cemeteries of the United States in which veterans of any war or conflict are or may be buried, whether in the United States or abroad, except cemeteries administered by the Secretary of the Interior, and burial benefits.

(b) The chairman and the ranking minority member shall serve as ex-officio members of all subcommittees and shall have the right to vote on all matters before the subcommittee.

Rule IX—Powers and Duties of Subcommittees

(a) Each subcommittee is authorized to meet, hold hearings, receive evidence, and report to the full committee on all matters referred to it or under its jurisdiction. Subcommittee chairmen shall set dates for hearings and meetings of their respective subcommittees after consultation with the chairman and other subcommittee chairmen with a view toward avoiding simultaneous scheduling of full committee and subcommittee meetings or hearings wherever possible.

(b) Whenever a subcommittee has ordered a bill, resolution, or other matter to be reported to the committee, the chairman of the subcommittee reporting the bill, resolution, or matter to the full committee, or any member authorized by the subcommittee to do so, may report such bill, resolution, or matter to the committee. It shall be the duty of the chairman of the subcommittee to report or cause to be reported promptly such bill, resolution, or matter, and to take or cause to be taken the necessary steps to bring such bill, resolution, or matter to a vote.

(c) In any event, the report of any subcommittee on a measure which has been approved by the subcommittee shall be filed within seven calendar days (exclusive of days on which the House is not in session) after the day on which there has been filed with the clerk of the committee a written request, signed by a majority of the members of the subcommittee, for the reporting of that measure. Upon the filing of any request, the clerk of the committee shall transmit immediately to the chairman of the subcommittee notice of the filing of that request.

ACTIVITIES UNDER THE JURISDICTION OF THE COMMITTEE AS ADMINISTERED BY

THE VETERANS' ADMINISTRATION

The Veterans' Administration, established on July 21, 1930, to bring together under a single agency responsibility for providing federal benefits to veterans and their dependents, is the Federal Government's largest independent agency.

In its more than half a century of service the VA has grown dramatically. The present veteran population of 28.2 million is six times the 4.7 million veterans living in America in the VA's founding year.

More than 18 million persons have received some form of training under the GI bill since its inception in 1944. More than 868,000 disabled veterans have received VA vocational rehabilitation counseling and training since this program began in 1943.

The VA hospital network has grown from 54 hospitals in 1930 to 172 today. With over 80,000 beds, these medical centers annually treat 1.4 million patients. The VA's outpatient clinics register more than 18 million visits a year. The VA provides nursing home and domiciliary care for approximately 91,000 veterans a year.

SCOPE OF OPERATIONS

The most comprehensive and diverse benefits in the agency's history are provided to veterans and dependents today.

The VA operates the nation's largest medical care system and is a major economic force in the nation's housing and insurance industries.

VA believes that no veteran program has contributed more to the lifelong welfare of America's veterans, their families and this country than veterans' education and training programs.

Compensation and pension benefits are provided to more than 4.5 million veterans, dependents and survivors. The VA provides burial grounds for 42,000 veterans a year, and financially assists additional thousands who have chosen to be interred in private cemeteries.

War veterans living today account for 59 percent of all Americans who ever served in war during our two-century history. Eighty-two of every 100 of America's 28.2 million veterans are war veterans, having served during defined periods of armed hostilities.

Altogether, 84.6 million persons—veterans, dependents and survivors of deceased veterans—are potentially eligible for VA benefits and services. This is a number roughly equal to the combined populations of our five largest States: California, New York, Texas, Pennsylvania, and Illinois.

Care for veterans and dependents spans centuries. The last dependent of a Revolutionary War veteran died in 1911. The last dependent of a War of 1812 veteran died 38 years ago. The last dependent of a Mexican War veteran died in 1962. Widows and children of Civil War and Indian War veterans still draw VA benefits. As of September 30, 1984, there were 22 veterans of the Spanish-American War and more than 8,000 children and widows of that war receiving VA compensation or pension benefits.

Through September 30, 1984, the VA and its predecessor agencies spent over \$440 billion for benefits and services to veterans, their dependents and survivors.

The fiscal 1984 VA budget calls for expenditures of about \$26 billion. This is the fifth largest budget among Federal agencies, ranking behind only the Departments of Health and Human Services, Defense, Labor, Treasury and Agriculture. Some 62.3 percent of VA outlays go for direct benefits such as compensation, pension and education checks; 32.7 percent of the budget is for hospital and medical care; 2.2 percent for hospital, national cemetery and other construction programs, and 2.8 percent of general operating expenses.

While in 1930 the VA was responsible for one-fourth of the Federal budget, in fiscal 1984 it represents only 3 percent of the Federal budget.

Some 220,000 of VA's 240,800 employees work full-time. Among all departments and agencies of the Federal Government, only the Department of Defense has a larger work force. One out of every 10 employees of the Federal Government's full-time permanent work force is employed by the VA.

The VA is the leader in hiring veterans. Some 68 percent of all male employees are veterans. Of this total, 53 percent served during the Vietnam era and 17 percent are disabled.

The proportion of full-time minority employees in the VA continues to increase. Some 32.4 percent of all VA full-time employees are of one minority or another, as of September 30, 1983. Blacks make up 25.9 percent of the work force.

More than 50 percent of the VA's employees are women. Women fill 14.5 percent of the positions at the executive level.

COMPENSATION AND PENSION

There are approximately 3 million veterans receiving disability compensation or pension payments from the VA. About 1.3 million widows and other survivors of veterans are being paid death compensation or death pension benefits.

Among the widows, children and parents receiving VA compensation and pension payments, more than 148,000 are survivors of Vietnam-era veterans.

VA disability and death compensation and pension expenditures are \$14 billion annually, an amount greater than the budget of 3 of the 13 cabinet-level departments.

EDUCATION AND TRAINING

From 1944, when the first GI bill became law, to December 1983, a total of 18.2 million beneficiaries have received GI bill education and training. This includes some 7.8 million World War II veterans, 2.4 million Korean conflict veterans, and 8 million Post-Korean and Vietnam-era veterans and active duty service personnel.

Through December 1983, the cost of these benefits has totaled \$56 billion, or \$20 billion more than the United States spent to fight World War I.

As an investment, however, this expenditure has been profitable to the Federal budget and the Nation. Additional income taxes from veterans, whose lifetime earnings were increased as a result of GI bill training, amount to several times more than the initial investment in education.

Some 8.3 million veterans have used their GI bill education entitlement to attend colleges, and 9.9 million received technical, farm and other training.

Some 2.2 million enrolled in college after World War II, and 1.2 million Korean conflict veterans attended college under their GI bill. Some 4.9 million Post-Korean and Vietnam-era veterans have gone to college on the GI bill so far. Included are hundreds of thousands of active duty service personnel.

Proportionally, Vietnam-era veterans have been the greatest participants in GI bill training. More than 70 percent of those eligible have taken training, compared with 50.5 percent for World War II veterans and 43.4 percent for Korean veterans.

Also assisted by the VA in their education have been more than 425,000 sons, daughters, widows or wives of permanently and totally disabled service-connected veterans or veterans whose deaths were service-connected.

MEDICAL CARE

Perhaps the most visible of all VA benefits and services is the VA's hospital and medical care program. This service is increasingly important to older veterans and particularly to the more than 4 million veterans who are 65 or older.

The VA health care system is comprised of 172 medical centers, 226 outpatient clinics, 105 nursing home care units and 16 domiciliarys.

There is at least one VA medical center in each of the 48 contiguous States, Puerto Rico and the District of Columbia.

Some 133 medical centers are affiliated with 101 medical schools. Seventy-two medical centers are affiliated with 59 dental schools.

About 100,000 students each year receive all or part of their clinical training in VA facilities. In addition, one half of all physicians in practice in the United States have received some portion of their training in VA health care facilities.

VA medical centers provide a wide range of professional services, including nursing, pharmacy, psychology, rehabilitative medicine and social work.

The VA medical care system employs 6,961 full-time physicians, 4,573 part-time physicians, 7,714 residents, 34,296 registered nurses, 9,571 practical nurses, 19,572 nursing assistants and some 115,000 other dedicated health-care specialists and medical service personnel.

Indispensable to providing America's veterans with quality medical care are the 79,000 members of the Veterans' Administration Voluntary Service. These volunteers are civic-minded Americans who donate more than 12 million hours of service each year to bring companionship and additional care to hospitalized veterans.

The \$9.1 billion budgeted for fiscal 1985 medical programs is a record high in VA history. It provides a \$543.7 million increase over fiscal 1984. In fiscal 1985, VA is expected to provide treatment for nearly 1.4 million inpatients and handle over 18.7 million outpatient medical visits.

Medical research has had an increasingly important role in the VA. VA research helped to conquer tuberculosis; to develop the heart pacemaker; to perfect kidney transplants and to develop the laser cane for the blind. VA researchers have expanded research on sickle cell anemia and advanced mental health care through the use of psychotropic drugs. VA scientists are among the scientific community researching the effects of Agent Orange on veterans who served in Southeast Asia.

VA will train nearly 100,000 physicians, dentists, nurses and other health service personnel in fiscal 1984. This total includes 25,700 medical house staffers and 21,500 medical students, 806 dental house staffers and 27,700 nursing students.

One-third of the Nation's resident physicians in specialty training are found in the VA system.

HOME LOAN ASSISTANCE

The VA's 40-year-old loan guaranty program has benefited more than 11 million veterans and their dependents.

From 1944, when this program was established as part of the original GI bill, VA home loan guaranties have totaled \$220 billion. In addition, the VA has made 333,000 direct loans valued at \$3.4 billion.

In 1983, VA guaranteed 285,696 loans valued at \$18 billion. Among these guaranties were 14,872 manufactured home loans amounting to \$313 million.

INSURANCE

The VA operates one of the largest life insurance programs in the world. This year the VA will administer and supervise approximately \$155 billion in life insurance policies for 7.8 million veterans and military service personnel.

The 1984 GI life insurance dividend is expected to total a record \$721.8 million. This is \$48.6 million more than the previous year.

NATIONAL CEMETERIES

Since 1973, the VA has established eight new national cemeteries. Six of these are open for interments—in New York, California, Massachusetts, Michigan, Pennsylvania, and Virginia. Two more cemeteries are planned, in Alabama and Florida.

Today the National Cemetery System is composed of 109 cemeteries in 38 States and Puerto Rico. Total acreage in the system has increased from 4,000 acres when the VA took over the system to the present 9,000 acres. The increase is designed to take care of veteran burials in the years ahead. Interments are expected to increase from 44,500 burials in 1983 to 70,000 in the year 2000.

LOOKING TO THE FUTURE

To cope with an aging patient population, the VA is expanding research efforts in geriatric medical treatment.

VA researchers are exploring ways to improve the treatment of the spinal-cord injured, and to develop new, improved artificial limbs for amputees. VA psychiatrists and physiologists are continuing to develop techniques in the treatment of schizophrenia, alcoholism, tissue regeneration and the long-term psychic effects of war.

A nationwide network of Vet Centers, expanded in 1983 to 136 "store-front" locations, provide psychological readjustment counseling to Vietnam-era veterans who have encountered difficulties in adjusting to civilian life. The VA has announced plans to open 52 additional centers.

The VA conducts an active outreach program for those who have not taken advantage of their veterans benefits. Current emphasis is being given to aging veterans, educationally disadvantaged veterans, women, former prisoners of wars and those exposed to Agent Orange and other herbicides and to radiation.

In the past 3 years the veteran population has begun to decline from a high point of nearly 30 million. Nevertheless, the VA will be providing benefits to veterans well into the 21st century, and to dependents of war veterans into the 22d century.

THE DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING SERVICES FOR VETERANS

The Department of Labor (DOL) is involved in a variety of measures to make sure no veteran who wants to work goes without a job or the training and assistance needed to get that job. There is special emphasis on assisting disabled veterans and veterans of the Vietnam era.

The Assistant Secretary for Veterans' Employment and Training is the principal advisor to the Secretary on all DOL policies and programs to meet the employment and training needs of veterans. Serving as the focal point for the department's veteran-related programs, OASVET administers laws, confers with and advises Congress, develops policies and programs and provides technical assistance to DOL components, other agencies and groups.

The field staff of the Veterans' Employment and Training Service (VETS) is a nationwide network of Regional, State and Assistant State Directors. There is at least one VETS representative stationed in every State and in Labor Department Regional Offices (in Boston, New York, Philadelphia, Atlanta, Chicago, Dallas, Kansas City, Denver and San Francisco). They supervise and provide technical assistance to State Job Service offices to ensure that legislatively-required priority for services such as counseling, referral and placement are provided to veterans. Job development efforts are carried out by VETS staff with employers, labor unions and veteran and community organizations. VETS staff promote participation of veterans and supervise the planning and operation of programs as they relate to veterans.

Employment-related services designed to aid veterans include counseling, testing, and skills training; unemployment compensation for newly separated ex-servicemembers while they look for civilian employment; tax credits for private employers who hire certain target groups of veterans; placement in private and public sector jobs, and reemployment rights assistance.

Job Service.—The public Job Service offices across the country provide veterans with priority in counseling, aptitude testing, job development, referral and placement in job openings. All Job Service offices have at least one specially trained Local Veterans' Employment Representative (LVER) who works directly with veterans.

Disabled Veterans' Outreach Program (DVOP).—Located in most Job Service offices, the program is staffed by veterans who provide special assistance to other veterans and help them obtain the employment and training services. The DVOP staff develop networks of employer contacts and work with community groups and veteran organizations in their efforts to find jobs for their clients. Unique to this program is the emphasis to seek out and help disabled and Vietnam-era veterans.

Training Programs.—The Department of Labor is the lead agency for ensuring the effective implementation of all national employment and training programs. The Job Training Partnership Act (JTPA) requires establishment of veterans' employment programs administered by the Office of the Assistant Secretary for Veterans' Employment and Training. Additionally, JTPA-funded

programs at the State and local levels may also provide opportunities for eligible veterans. For specific information, veterans should contact a Job Service or Veterans' Employment and Training Service office listed under the U.S. Department of Labor.

Targeted Jobs Tax Credit (TJTC).—The purpose of this tax credit program is to hire certain target groups of workers including low-income Vietnam-era veterans and certain disabled veterans. Employers can receive credit equal to fifty percent of the first-year wages up to \$6,000 for each eligible employee and twenty-five percent of second-year wages up to \$6,000. Information regarding TJTC may be obtained from any Job Service office.

Unemployment Compensation for Ex-servicemembers (UCX).—Certain veterans are eligible for unemployment compensation payments while looking for work following completion of military service. Eligibility can be determined at any Unemployment Insurance office, usually located in the same building as the Job Service.

Reemployment Rights.—Recently separated veterans returning from tours of active duty may be eligible for reemployment rights. These include reinstatement with the employer the veteran left to enter military service and all benefits of seniority that have accrued during the military absence. Application for reinstatement must be made to the former employer within 90 days after separation from active duty. Reservists and members of the National Guard who complete tours of active and inactive duty for training may also have reinstatement rights with their former employers.

Veterans Affirmative Action.—Employers with Federal contracts of at least \$10,000 are required by law to take special steps on behalf of disabled and Vietnam-era veterans and to list job openings with the Job Service. The Job Service gives these groups of veterans priority when referring applicants to Federal contractor job openings. Job Service staff also assist employers in meeting their program obligations.

AMERICAN BATTLE MONUMENTS COMMISSION

Another agency over which the Committee has jurisdiction is the American Battle Monuments Commission, which is responsible for the construction and permanent maintenance of military cemeteries and memorials on foreign soil, as well as certain memorials in the United States.

The American Battle Monuments Commission was created by an Act of Congress in 1923 (36 USC 121-138b). Its principal functions are to commemorate the sacrifices and achievements of American Armed Forces where they have served since April 6, 1917; to control the design and construction of military monuments and markers in foreign countries by other U.S. citizens and organizations, both public and private; and to encourage other government agencies; private organizations, private individuals and States to maintain properly the military monuments and markers erected by them on foreign soil; and if adequate maintenance is not performed, to arrange for demolition of the monument or marker, or in those rare instances where its excellence of design, basic construction and aesthetic qualities warrant, to take steps to assume responsibility for it.

Currently, ABMC administers and maintains twenty-four permanent American military cemetery memorials and eleven separate monuments in nine foreign countries, and three memorials in the United States. The Commission also monitors the state of maintenance and repair of 150 private U.S. monuments and memorials in foreign countries.

Interred in the Commission's cemeteries are 124,902 U.S. War Dead—30,920 of World War I, 93,232 of World War II and 750 of the Mexican War. All ABMC cemeteries are closed to burials except (1) the newly established cemetery at Corozal, Panama, and (2) for the remains of the U.S. War Dead still found from time to time on the battlefields of those wars. In addition to the burials, these cemeteries, together with three memorials on United States soil, commemorate individually by name on Tablets of the Missing the 91,598 U.S. servicemen and women who are Missing in Action or were lost or buried at sea during World War I, World War II, and the Korean conflict. A similar commemoration was held in May 1980 at the Honolulu Memorial for the 2,489 Missing in Action in Vietnam.

The cemeteries and memorials of the Commission are unquestionably the most beautiful and meticulously maintained cemeteries and memorials in the world. No others combine such fitness of design, beauty of landscaping and memorial features, and immaculate care. The Commission's cemeteries and memorials receive over 7,000,000 each year.

MESSAGES FROM THE PRESIDENT AND EXECUTIVE COMMUNICATIONS

29—Jan. 3, 1983, a December 23, 1982 letter from the Administrator, Veterans' Affairs, transmitting a report on the activities of the exchange of medical information program of the Veterans' Administration for the fiscal year 1982, pursuant to 38 U.S.C. 5057.

185—Jan. 25, 1983, a January 11, 1983 letter from the Administrator, Veterans' Affairs, transmitting a report covering fiscal year 1982 on the nature and disposition of all cases in which an institution, approved for veterans' benefits, utilizes advertising, sales, or enrollment practices which are erroneous, deceptive, or misleading, pursuant to 38 U.S.C. 1796(d).

186—Jan. 25, 1983, a January 11, 1983 letter from the Administrator, Veterans' Affairs, transmitting a report on the sharing of medical resources program of the Veterans' Administration for fiscal year 1982 pursuant to 38 U.S.C. 5057.

348—Feb. 14, 1983, a February 9, 1983 letter from the Administrator, Veterans' Affairs, transmitting a draft of proposed legislation to amend title 38, United States Code, to repeal the authority for eligible veterans and eligible spouses to pursue correspondence training, and for other purposes. (H.R. 1655) (Committee print No. 6).

356—Feb. 15, 1983, a February 14, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to extend the authority of the Administrator of Veterans' Affairs to provide certain

contract hospital care and medical services in Puerto Rico, the Virgin Islands, and other territories. (H.R. 1774) (Committee print No. 7).

399—Feb. 22, 1983, a February 17, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to terminate the authority of the Administrator of Veterans' Affairs to make advance payments of educational and subsistence allowances, and for other purposes. (H.R. 1656) (Committee print No. 9).

411—Feb. 23, 1983, a February 17, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to authorize the Veterans' Administration to administer a community residential care program. (See H.R. 106) (Committee print No. 10).

502—Mar. 7, 1983, a February 28, 1983 letter from the Administrator, Veterans' Affairs, transmitting recommendations and guidelines to promote the sharing of health-care resources, pursuant to 38 U.S.C. 5011(f); jointly, to the Committees on Armed Services and Veterans' Affairs.

629—Mar. 15, 1983, a March 10, 1983 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to authorize the Administrator to make contributions for construction projects on land adjacent to national cemeteries in order to facilitate safe ingress or egress. (H.R. 2220) (Committee print No. 12).

630—Mar. 15, 1983, a March 10, 1983 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to authorize the expansion of the Board of Veterans Appeals and the designation of certain individuals to act as members of the Board, and for other purposes. (H.R. 2194) (Committee print No. 13).

792—Apr. 5, 1983, a March 25, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to permit substitution of a veteran's housing loan entitlement when the veteran transferee is not an immediate transferee. (H.R. 2505) (Committee print No. 2).

793—Apr. 5, 1983, a March 25, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend subsection 1008(a)(2) of title 38, United States Code, to authorize to be appropriated such sums as deemed appropriate for fiscal year 1985 and for each of the 4 succeeding fiscal years. (H.R. 2506) (Committee print No. 14).

899—Apr. 18, 1983, an April 7, 1983 letter from the Administrator, Veterans' Administration, transmitting a report on cases in which equitable relief from administrative error was granted, pursuant to 38 U.S.C. 210(c)(3)(B).

954—Apr. 19, 1983, an April 15, 1983 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to clarify the authority of the Administrator to permit a Federal fiduciary, administratively appointed by the Veterans' Administration to deduct from

the beneficiary's estate a modest commission for fiduciary services. (H.R. 2758) (Committee print No. 20).

955—Apr. 19, 1983, an April 18, 1983 letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to increase rates of compensation for service-disabled veterans and rates of dependency and indemnity compensation payable to certain veterans' survivors. (H.R. 2757) (Committee print No. 21).

964—Apr. 20, 1983, an April 15, 1983 letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to amend title 38, United States Code, to provide that appointments to certain positions in the Department of Medicine and Surgery of the Veterans' Administration may be optional and to clarify the authority of the Chief Medical Director or designee regarding disciplinary actions on probationary employees. (H.R. 2786) (Committee print No. 19).

1332—June 8, 1983, a June 3, 1983 letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to amend title 38, United States Code, to provide for the exclusion of residents and interns from coverage under the Federal Labor-Management Relations Statute; jointly, to the Committees on Veterans' Affairs and Post Office and Civil Service. (H.R. 3951) (Committee print No. 33).

1422—June 23, 1983, a June 22, 1983 letter from the Deputy Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to modify and improve the educational assistance programs administered by the Veterans' Administration, and for other purposes. (H.R. 3509) (Committee print No. 34).

1434—June 28, 1983, a June 22, 1983 letter from the Deputy Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to amend title 38, United States Code, to expand the scope of the membership of the special medical advisory group. (H.R. 3531) (Committee print No. 35).

1542—July 14, 1983, a July 4, 1983 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting the 1982 annual report for fiscal year 1982, pursuant to 38 U.S.C. 214.

1575—July 19, 1983, a July 13, 1983 letter from the Deputy Director, Office of Management and Budget, transmitting a draft of proposed legislation to transfer custodianship and operating responsibility for Pershing Hall in Paris, France, and provide for its administration as a memorial. (H.R. 3730) (Committee print No. 38).

1802—Sept. 12, 1983, a September 2, 1983 letter from the Administrator, Veterans' Affairs, transmitting the report of the Advisory Committee on Former Prisoners of War, pursuant to section 6(b)(2) of Public Law 97-37. (Committee print No. 42).

1816—Sept. 12, 1983, an August 19, 1983 letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to amend title 38, United States Code, to provide for confidential treatment of medical and prosthetic research information. (H.R. 4215) (Committee print No. 45).

2143—Nov. 15, 1983, a November 10, 1983 letter from the Adjutant General, United Spanish War Veterans, transmitting the proceedings of the stated convention of the 84th National Encamp-

ment, United Spanish War Veterans, Inc., held in Louisville, KY, August 28 to September 2, 1982, pursuant to Public Law 77-249. (H. Doc. No. 98-132).

2431—Jan. 23, 1984, a December 7, 1983 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting an addendum to the report previously submitted by the Advisory Committee on Former Prisoners of War, pursuant to 38 U.S.C. 221(c) (95 Stat. 935).

2432—Jan. 23, 1984, a December 20, 1983 letter from the Administrator, Veterans' Administration, transmitting the annual report on deceptive advertising by institutions offering courses approved for veterans, pursuant to 38 U.S.C. 1796(d).

2433—Jan. 23, 1984, a December 22, 1983 letter from the director, National Legislative Commission, the American Legion, transmitting the proceeding of the 65th annual National Convention, pursuant to the act of September 19, 1919, chapter 59, section 9. (H. Doc. No. 98-153).

2434—Jan. 23, 1984, a December 1, 1983 communication from the national adjutant, Disabled American Veterans, transmitting the proceedings of its national convention, held in Los Angeles, CA, July 31-August 4, 1983, pursuant to Public Law 88-504, section 3. (36 U.S.C. 1103) (H. Doc. No. 98-150).

2721—Feb. 27, 1984, a letter of February 24, 1984 from the Director, Office of Personnel Management, transmitting a draft of proposed legislation to amend title 38, United States Code, to extend and improve the program of veterans readjustment appointments in the Federal Government and for other purposes. (Committee print No. 54).

2859—Mar. 8, 1984, a letter from the Secretary of Transportation, transmitting a draft of proposed legislation to improve the management and efficiency of the Coast Guard pursuant to 31 U.S.C. 1110. Referred jointly with Committee on Merchant Marine and Fisheries; Armed Services; and the Judiciary. (H.R. 5445).

2871—Mar. 12, 1984, a March 7, 1984 letter from the Deputy Administrator, Veterans' Administration, transmitting a report on sharing of medical facilities and exchange of medical information for fiscal year 1983, pursuant to 38 U.S.C. 5057.

2893—Mar. 13, 1984, a March 8, 1984 letter from the Secretary of Defense and Administrator of the Veterans' Administration, transmitting a joint report of the Administrator of the Veterans' Administration and the Secretary of Defense on recommendations and guidelines to promote the sharing of health care resources, pursuant to 38 U.S.C. 5011(f). Referred jointly with Committee on Armed Services.

2970—Mar. 21, 1984, a March 14, 1984 letter from the Deputy Administrator for Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to authorize the Administrator of Veterans' Affairs to provide uniform allowances to Veterans' Administration law enforcement personnel, pursuant to 31 U.S.C. 1110. Referred jointly with the Post Office and Civil Service Committee. (Committee print No. 59).

3100—Apr. 5, 1984, an April 4, 1984 letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation

entitled the "Veterans' Readjustment Act of 1984", pursuant to 31 U.S.C. 1110. (H.R. 5461) (Committee print No. 61).

3202—Apr. 24, 1984, an April 16, 1984 letter from the Deputy Administrator of Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to repeal section 201(b) of Public Law 96-22. (Committee print No. 66).

3205—Apr. 24, 1984, an April 11, 1984 letter from the Administrator of Veterans' Affairs, transmitting a report on the progress made by the VA in its work on the development of staffing guidelines for the VA's medical center activities; jointly referred to Appropriations Committee.

3267—May 2, 1984, an April 24, 1984 letter from the Administrator, Veterans' Administration, transmitting a report on the disposition of cases granted relief from administrative error, overpayment and forfeiture during 1983, pursuant to 38, U.S.C. 210(c)(3)(B).

3268—May 2, 1984, an April 24, 1984 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to increase the rates of disability compensation for disabled veterans and to increase the rates of dependency and indemnity compensation for surviving spouses and children of veterans; and for other purposes, pursuant to 31 U.S.C. 1110. (Committee print No. 69).

3280—May 3, 1984, an April 24, 1984 letter from the Administrator of Veterans' Affairs transmitting a draft of proposed legislation to amend title 38, United States Code, to extend the authority of the Veterans' Administration to conduct certain health care programs, and for other purposes, pursuant to 31 U.S.C. 1110 (H.R. 5775). (Committee print No. 67).

3293—May 7, 1984, an April 24, 1984 letter from the Deputy Administrator of Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to grant discretion to the Administrator to administer garage and parking appropriations and fees as a revolving fund. (H.R. 5776). (Committee print No. 68).

3346—May 14, 1984, a May 7, 1984 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to authorize direct appropriations to the Veterans' Administration loan guaranty revolving fund, pursuant to 31 U.S.C. 1110. (H.R. 5705). (Committee print No. 71).

3488—June 5, 1984, a May 29, 1984 letter from the Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to promote sharing of alcohol and drug dependence and abuse treatment resources between the Veterans' Administration and the Department of Defense; referred jointly with the Armed Services Committee. (Committee print No. 77).

3519—June 7, 1984, a May 30, 1984 letter from the Comptroller General of the United States, transmitting a copy of a report entitled, "Examination of the Veterans Canteen Service's Financial Statements for the year ended September 30, 1983," (GAO/AFMD-84-86. May 30, 1984); referred jointly with the Government Operations Committee.

3615—June 21, 1984, a June 18, 1984 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting a copy of a lease prospectus for the establishment of a new outpatient clinic in Pensacola, FL, pursuant to 38 U.S.C. 5004(b) (93 Stat. 56).

3790—July 25, 1984, a July 19, 1984 letter from the Administrator of Veterans' Affairs, Veterans' Administration, transmitting a report on the activities of the Veterans' Administration for the fiscal year ending September 30, 1983, pursuant to 38 U.S.C. 214, 221(c), 1521 and 4001(c)(3).

3960—Sept. 5, 1984, an Aug. 20, 1984 letter from the Deputy Administrator, Veterans' Administration, transmitting a draft of proposed legislation to amend title 38, United States Code, to enhance recruitment and retention by the Veterans' Administration of graduate and student nurse technicians. (Committee print No. 83).

4082—Sept. 26, 1984, a letter from the Adjutant General, United Spanish War Veterans, transmitting the proceedings of the stated convention of the 85th national encampment, United Spanish War Veterans, Inc., held in Jacksonville Beach, FL, September 10 to 15, 1983. (H. Doc. No. 98-266).

4159—Oct. 11, 1984, a letter from the National Adjutant, Disabled American Veterans, transmitting the proceedings of the national convention held in Washington, DC, August 26-30, 1984, pursuant to 38 U.S.C. 90i; 44 U.S.C. 1332. (H. Doc. 98-276).

SUMMARY OF VETERANS' AFFAIRS COMMITTEE ACTION
BILLS AND RESOLUTIONS REFERRED AND HEARINGS EXECUTIVE SESSIONS CONDUCTED

	Congress																		96th	97th	98th
	80th	81st	82d	83d	84th	85th	86th	87th	88th	89th	90th	91st	92d	93d	94th	95th	96th	97th	98th		
Bills and resolutions referred.....	498	619	436	402	537	491	628	592	508	791	685	740	693	839	719	709	339	273	229		
Hearings sessions.....	60	64	50	46	71	69	55	45	50	71	46	43	37	44	58	72	84	89	71		
Hearings' printed pages.....	3,596	2,355	2,562	5,337	4,271	4,834	3,472	3,055	3,927	4,659	3,854	4,353	2,480	2,837	2,832						
Executive sessions.....	49	34	27	55	37	28	21	15	21	32	13	27	21	16	30	26	19	18	16		
Bill reported.....	60	44	36	36	48	44	42	52	41	47	*19	34	26	*14	23	32	11	16	15		
Bills in House.....	16	1	.....	14	1	5	2	*8	*5	*4	4	1	4	1	0	1	1	1	3		
Pending in Senate committees.....	6	16	14	2	17	11	6	*13	7	*12	3	9	7	2	*9	17	3	6	6		
Bills on Senate Calendar or in Senate.....	1	1	1	2	.....	1	*2	0	1	0	0	0	0	0	0	1	1	1	0		
Recommitted.....	1	1	1	.....	.....	1	.....	.....	.....	.....	.....	.....	2	1	.....	.....	1	0	0		
Bills vetoed.....	1	2	4	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	1	0	0		
Bills passed over veto.....	1	1	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....		
Laws enacted.....	36	24	22	25	30	26	33	*32	29	30	15	24	15	15	15	13	6	8	8		

* Including 4 bills enacted as amendment to other legislation; 1 left in House when similar Senate bill returned to Senate; and 1 similar to another bill enacted (Public Law 87-645).

† Includes 2 bills enacted as amendments to other bills.

‡ Includes 1 bill enacted as amendment to another bill.

§ Some laws include the substance of more than 1 bill reported separately.

|| Provisions of 3 of these bills were passed by the House as a separate bill, and the provisions of 1 bill were included as an amendment to another bill which became public law.

¶ Provisions of 3 of these bills were passed by the House as a separate bill, and portions of 1 bill left in the House were enacted as part of another bill.

‡ One bill in a Senate committee had purpose accomplished administratively; 5 others were enacted as sections of another bill, and portions of 1 bill left in the House were enacted as part of another bill.

§ Includes S.J. Res. 197 making technical correction to law, which was brought to House floor for immediate consideration and passed by unanimous consent.

|| The difference in number of bills reported (14) and laws enacted (15) is due to fact that S. 3705 did not go to the House Committee. However, the subject matter was included in H.R. 12628.

†† Includes H.R. 9576 subject matter of which was contained in S. 969, passed in lieu.

HEARINGS AND EXECUTIVE SESSIONS

All hearings and executive sessions of the Committee are held in room 334, Cannon House Office Building unless otherwise designated.

Feb. 1, 1983—Open. 9:30 a.m. Full Committee organization meeting.

Feb. 15, 1983—Open. 9:30 a.m. 345 Cannon House Office Building. Full Committee joint hearing with the Senate Veterans' Affairs' Committee. Veterans organizations programs. Disabled American Veterans.

Feb. 16, 1983—8:30 a.m. Executive. 9:15 a.m. Open. Executive planning session followed by hearing on H.R. 103 and Contract Authority in Puerto Rico and the Virgin Islands. Witnesses: Hon. Baltasar Corrada, Hon. Harold Sawyer, National Association of State Veterans Homes, veterans organizations and Veterans' Administration. (Serial No. 98-1).

Feb. 17, 1983—Open. 9:00 a.m. Full Committee. Proposed VA budget for FY 1984. Witnesses: Veterans' Administration and veterans organizations. (Serial No. 98-2).

Feb. 23, 1983—Open. 9:00 a.m. Subcommittee on Education, Training and Employment. VA on-the-job and apprenticeship training program. Witnesses: Veterans' Administration, Department of Labor and veterans organizations. (Serial No. 98-3).

Feb. 24, 1983—Open. 10:00 a.m. Full Committee. Markup of Committee Report to Budget Committee.

Mar. 1, 1983—Open. 9:00 a.m. Full Committee joint hearing with the Senate Veterans' Affairs Committee. Veterans organizations programs. Paralyzed Veterans of America, Veterans of World War I of the United States of America, Inc., Military Order of the Purple Heart, and Regular Veterans Association.

Mar. 3, 1983—Open. 9:00 a.m. Subcommittee on Hospitals and Health Care. H.R. 1137 and VA Health Care for Women Veterans. Witnesses: Two panels of public witnesses and veterans organizations, General Accounting Office and Veterans' Administration. (Serial No. 98-4).

Mar. 8, 1983—Open. 9:30 a.m. 345 Cannon House Office Building. Full Committee. Veterans organizations programs. Veterans of Foreign Wars.

Mar. 16, 1983—Open. 9:00 a.m. Subcommittee on Hospitals and Health Care. VA Medical Construction Program. Witnesses: Hon. Jack Hightower, Hon. Marjorie Holt, Veterans' Administration and veterans organizations. (Serial No. 98-5).

Mar. 17, 1983—Open. 9:00 a.m. Full Committee joint hearing with the Senate Veterans' Affairs Committee. Veterans organizations programs. AMVETS, Blinded Veterans Association, Jewish War Veterans of the United States of America, and The Retired Officers Association.

Mar. 23, 1983—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. Small Business Loan Program for Veterans. Witnesses: Veterans' Administration, Small Business Administration and veterans organizations. (Serial No. 98-6).

Mar. 24, 1983.—Open. 9:00 a.m. Subcommittee on Hospitals and Health Care. H.R. 1443 and oversight of the VA's Readjustment

Counseling Program. Witnesses: Veterans Administration and veterans organizations. (Serial No. 98-7).

Mar. 29, 1983.—Open. 9:30 a.m. New Capitol Building, Jackson, Mississippi. Subcommittee on Oversight and Investigations. Veterans Administration programs in Mississippi and implementation of PL 97-37. Witnesses: Veterans Administration, veterans' organizations and public witnesses. (Serial No. 98-8).

Mar. 30, 1983.—Open. 9:30 a.m. City Hall, Biloxi, Mississippi. Subcommittee on Oversight and Investigations. Veterans Administration benefits and services to the veterans in Mississippi. Witnesses: Veterans Administration, Department of the Air Force and veterans' organizations. (Serial No. 98-9).

Apr. 6, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. H.R. 1312 and H.R. 2194. Witnesses: Veterans Administration and veterans organizations. (Serial No. 98-10).

Apr. 7, 1983.—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. Veterans preference in the Federal Government. Witnesses: Office of Personnel Management and veterans organizations. (Serial No. 98-11).

Apr. 12, 1983.—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. H.R. 64, 613, 1400 and 1944. Witnesses: Hon. Robert W. Edgar, Hon. Charles E. Bennett, Dept. of Defense, U.S. Army, U.S. Navy, U.S. Air Force, U.S. Marine Corps, Veterans Administration and veterans organizations. (Serial No. 98-12).

Apr. 14, 1983.—Open. 9:00 a.m. Subcommittee on Housing and Memorial Affairs. H.R. 652, 2220, and 2506. Witnesses: Veterans Administration and veterans organizations. (Serial No. 98-13).

Apr. 19, 1983.—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. H.R. 2355. Witnesses: Veterans Administration, U.S. Department of Labor and veterans organizations. (Serial No. 98-14).

Apr. 19, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. H.R. 2391. Witnesses: Veterans Administration and veterans organizations. (Serial No. 98-15).

Apr. 21, 1983.—Open. 9:00 a.m. Subcommittee on Housing and Memorial Affairs. H.R. 2505, 2618, and 2664. Witnesses: Veterans Administration, Mortgage Bankers Association, Manufactured Housing Institute, Coordinating Council on Manufactured Housing Finance, Philadelphia Unemployment Project, MON-Valley Unemployment Commission and veterans organizations. (Serial No. 98-16).

Apr. 25, 1983.—Open. 9:00 a.m. VA Medical Center, Pittsburgh, PA. Subcommittee on Hospitals and Health Care. Oversight of health care delivery system. Witnesses: Veterans Administration, veterans organizations, members of the Pennsylvania State Legislature, and public witnesses. (Serial No. 98-17).

Apr. 26, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. H.R. 1961. Witnesses: Hon. David E. Bonior, Veterans Administration, veterans organizations. (Serial No. 98-18).

Apr. 27, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Cont. on H.R. 1961. Witnesses: Hon. Barbara Boxer, Veterans Administration and public witnesses. (Serial No. 98-18).

Apr. 28, 1983.—Open. 9:00 a.m. Subcommittee on Housing and Memorial Affairs. Markup. H.R. 2618, 2664, 2505, 2506 and 2220. Clean bill to be introduced and recommended. (H.R. 2948).

May 3, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations. Status of Federally conducted Agent Orange studies. Witnesses: Hon. Thomas J. Downey, Dept. of HHS, NIH, CDC, NIOSH, Ctr. for Environmental Health, Veterans Administration, Air Force, Members of the State of Tenn. House of Representatives. (Serial No. 98-19).

May 4, 1983.—Open. 8:30 a.m. Subcommittee on Compensation, Pension and Insurance. Markup. Clean bill to be introduced recommended in lieu of H.R. 2194 (H.R. 2936) and H.R. 2391 (H.R. 2937).

May 4, 1983.—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. Markup. H.R. 1400 and H.R. 2355 recommended to Full Committee.

May 5, 1983.—Open. 10:00 a.m. Subcommittee on Hospitals and Health Care. Markup. H.R. 2323, 1137, 1645, 1975 and 741. Clean bill to be introduced and recommended. (H.R. 2920).

May 10, 1983.—Open. 9:00 a.m. Full Committee. Markup. VA construction resolution approved. Ordered reported H.R. 2920, 2936, 2937, 2948 and 2355. H.R. 1400 reported as amended.

May 24, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations. Review Federal activities on low level radiation exposure studies and implementation of P.L. 97-72. Witnesses: Hon. Paul Simon, Defense Nuclear Agency, Veterans Administration, Centers for Disease Control, National Academy of Sciences, National Association of Atomic Veterans and veterans organizations. (Serial No. 98-20).

June 28, 1983.—Open. 9:00 a.m. Subcommittee on Hospitals and Health Care. Oversight of chiropractic services. Witnesses: Hon. Ron Wyden, Veterans Administration, American Medical Colleges, American Chiropractic Association, International Chiropractors Association and veterans organizations. (Serial No. 98-21).

July 7, 1983.—Open. 9:00 a.m. Edward J. Hines VA Hospital, Hines, Illinois. Subcommittee on Hospitals and Health Care. Quality and quantity of VA health care provided in Great Lakes Region. Witnesses: Veterans Administration, veterans' organizations and public witnesses. (Serial No. 98-22).

July 12, 1983.—Open. 8:30 a.m. Subcommittee on Compensation, Pension and Insurance. H.R. 1961. Witnesses: Hon. William R. Ratchford, Veterans Administration, Department of the Air Force, American Medical Association, Armed Forces Institute of Pathology, National Institute of Environmental Health and Sciences, Rockefeller University Hospital, University of Illinois Medical Center, and public witnesses. (Serial No. 98-23).

July 14, 1983.—Open. 10:30 a.m. Subcommittee on Education, Training and Employment. Vocational Rehabilitation Program. Witnesses: Veterans Administration and veterans' organizations. (Serial No. 98-24).

July 21, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations. Judicial review. Witnesses: Senator Alan Cranston, Hon. John LaFalce, Department of Justice, and veterans' organizations. (Serial No. 98-25).

July 22, 1983.—Open. 9:30 a.m. Subcommittee on Housing and Memorial Affairs. PERA Building, Santa Fe, New Mexico. Expansion of national veterans' cemetery and/or need of State veterans' cemetery; oversight of Veterans Administration guaranteed home loan program. Witnesses: Hon. Manuel Lujan, Governor Toney Anaya, Veterans Administration, public witnesses, veterans' organizations, and members representing the Navajo Nation. (Serial No. 98-26).

July 26, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations. Continuation of 7-21-83 hearing on judicial review. Witnesses: Veterans Administration, Administrative Conference of the United States, American Bar Association, and veterans' organizations. (Serial No. 98-25).

July 28, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Markup. H.R. 1961. Recommended to Full Committee.

Aug. 2, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. World War I pension, H.R. 1918, 2735, and 1369. Witnesses: Hon. Glenn Anderson, Veterans Administration, and veterans' organizations. (Serial No. 98-27).

Aug. 9, 1983.—Open. 9:00 a.m. Subcommittee on Hospitals and Health Care. Health Care Delivery Facilities in the Northeast Region. John McCormick Post Office Bldg., Boston, Massachusetts. Witnesses: Veterans Administration Commonwealth of Massachusetts Special Commission on the Concerns of Vietnam Veterans, veterans organizations, and public witnesses. (Serial No. 98-28).

Sept. 8, 1983.—Open. 1:30 p.m. Subcommittee on Hospitals and Health Care. Orlando International Airport, Orlando, Florida. Assess quantity and quality of health care provided in the Veterans Administration Southeastern Medical Region. Witnesses: Hon. Richard T. Crotty, Member, Florida House of Representatives; Hon. William Frederick, Mayor, Orlando, Florida; Veterans Administration; Florida Commission on Veterans' Affairs; veterans' organizations; and public witnesses. (Serial No. 98-29).

Sept. 20, 1983.—Open. 9:00 a.m. Full Committee. Legislative program of The American Legion.

Sept. 22, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Oversight of the compensation and dependency and indemnity compensation program. Witnesses: Hon. G. William Whitehurst, Veterans Administration and veterans' organizations. (Serial No. 98-30).

Sept. 27, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations. Report of the Association of Orthopaedic Chairmen on the VA medical program. Witnesses: Association of Orthopaedic Chairmen; Veterans Administration; Georgetown Univ. School of Medicine; and Dr. Paul Schafer, Ex. Dir. National Assoc. of VA Physicians. (Serial No. 98-31).

Sept. 29, 1983.—Open. 9:30 a.m. Subcommittee on Education, Training and Employment. VRA extension and increases in the GI bill rates. Witnesses: Office of Personnel Management; Veterans Administration; and veterans' organizations. (Serial No. 98-32).

Oct. 4, 1983.—Open. 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Review of VA insurance programs. Wit-

nesses: Veterans Administration; and veterans' organizations. (Serial No. 98-33).

Oct. 22, 1983.—Open. 2:30 p.m. Subcommittee on Hospitals and Health Care. University of Colorado School of Nursing, Denver, Colorado. Review inpatient and outpatient VA health care in Mid-western VA Region and to assess ability of VA to meet health care needs and projected demand. Witnesses: Veterans Administration, veterans' organizations, and public witness. (Serial No. 98-34).

Oct. 27, 1983.—Open. 9:00 a.m. Subcommittee on Housing and Memorial Affairs. Oversight of VA home loan guaranty program. Witnesses: Veterans Administration, Mortgage Bankers Association, National Manufactured Housing Finance Association, and veterans' organizations.

Nov. 3, 1983.—Open. 9:00 a.m. Full Committee. Markup. Ordered reported H.R. 2629. H.R. 1961 ordered reported as amended. Clean bill recommended. Ordered reported in lieu of H.R. 3012 and 3720 (H.R. 4294).

Nov. 16, 1983.—Open. 8:30 a.m. Subcommittee on Oversight and Investigations, joint hearing with Senate Veterans' Affairs Committee. Adequacy of VA Standards and Procedures with Respect to Funeral and Burial Services. Witnesses: Senator David Pryor, Senator John Warner, Veterans Administration, and veterans' organizations. (Serial No. 98-36).

Nov. 22, 1983.—Open. 2:30 p.m. Subcommittee on Hospitals and Health Care. Ceremonial Court Room, Federal Building, San Francisco, California. Quality and quantity health care in VA Western Medical Region. Witnesses: Veterans Administration, Arizona and California service organizations, and State of California Dept. of VA. (Serial No. 98-37).

Jan. 12, 1984.—Open. 9:00 a.m. Subcommittee on Education, Training and Employment. County Administration Center, San Diego, California. Evaluation of assistance to veterans in obtaining job assistance and employment. Witnesses: Mr. David Szumowski, aide to Hon. Bill Lowery of Calif.; Veterans Administration; veterans' organizations; U.S. Dept. of Labor; and public witnesses. (Serial No. 98-38).

Feb. 7, 1984.—Open. 9:00 a.m. Joint full Committee with Senate Veterans' Affairs Committee, SD-106, Dirksen Senate Office Building. Disabled American Veterans legislative program.

Feb. 8, 1984.—Open. 9:00 a.m. Full Committee. Proposed VA budget for FY '85. Witnesses: Veterans Administration and veterans organizations. (Serial No. 98-39).

Feb. 23, 1984.—Open 9:00 a.m. Subcommittee on Hospital and Health Care. DM&S construction, MEDIFF status, and Puerto Rico and Virgin Islands VA health care plans. Witnesses: Hon. Ron de Lugo, a Representative in Congress from the Virgin Islands; Veterans Administration; and veterans organizations.

Mar. 1, 1984.—Open 9:30 a.m. Subcommittee on Education, Training and Employment, Markup. H.R. 4648 and 4649.

Mar. 6, 1984.—Open 9:00 a.m. Full Committee. Room 345. Veterans of Foreign Wars legislative program for 1984.

Mar. 7, 1984.—Open 9:00 a.m. Subcommittee on Hospital and Health Care. H.R. 4792, 4694, 3876, 4625. Witnesses: Veterans Ad-

ministration; Ex. Dir., National Association of VA Physicians; and veterans organizations. (Serial No. 98-41).

Mar. 8, 1984.—Open 9:00 a.m. Full Committee Markup. Report to Budget Committee on FY '85 VA Budget.

Mar. 15, 1984.—Open 9:00 a.m. Subcommittee on Housing and Memorial Affairs. Oversight Hearing on the Grace Report and the VA guaranty home loan program. Witnesses: Veterans Administration; Congressional Budget Office; Federal National Mortgage Association; Mortgage Bankers Association; and veterans organizations. (Serial No. 98-42).

Mar. 19, 1984.—Open 9:30 a.m. Subcommittee on Hospitals and Health Care. Hospital Auditorium, VA Medical Center, Martinsburg, West Virginia. Quality and quantity of VA health care in West Virginia. Witnesses: Veterans Administration; Chairman of VA Center Committee, Martinsburg-Berkeley County Chamber of Commerce; Deputy Director, Martinsburg Field Office, West Virginia Dept. of Veterans' Affairs; and veterans organizations. (Serial No. 98-43).

Mar. 19, 1984.—Open 2:30 p.m. Subcommittee on Hospitals and Health Care. Louis Johnson VA Medical Center, Clarksburg, West Virginia. Quality and quantity of VA health care in West Virginia. Witnesses: Veterans Administration; and veterans organizations. (Serial No. 98-44).

Mar. 19, 1984.—Open 10:00 a.m. Subcommittee on Housing and Memorial Affairs. Alabama Farm Bureau Bldg., Montgomery, Alabama. Oversight VA home loan guaranty program. Witnesses: Mr. Walter Bambert, District Representative for Congressman William L. Dickinson; Veterans Administration; Colonial Mortgage Co.; Real Estate Finance Inc.; Engel Mortgage Co. Inc.; veterans organizations; and Greater Birmingham Ministries. (Serial No. 98-45).

Mar. 28, 1984.—Open 9:00 a.m. Room SD-106. Full Committee. Joint hearing with Senate Veterans' Affairs Committee. Veterans organizations legislative programs. AMVETS, Blinded Veterans of America, Paralyzed Veterans of America, Purple Heart and Veterans of World War I.

Mar. 29, 1984.—Open 9:00 a.m. Subcommittee on Hospitals and Health Care. Vietnam veterans "combat units", post-traumatic stress disorder and readjustment counseling programs. Witnesses: Veterans Administration, and veterans organizations. (Serial No. 98-46).

Apr. 5, 1984.—Open 10:00 a.m. Subcommittee on Education, Training and Employment. Emergency Veterans Jobs Training Act of 1983, Public Law 98-77. Witnesses: Veterans Administration; Department of Labor; Chairman, Veterans' Affairs Committee, Interstate Conference of Employment Security Agencies, Inc.; Chairman, Employers' National Job Service Committee; Ameriserv Corporation; veterans organizations; and Ex. Director, Vietnam Veterans Leadership Program of Massachusetts. (Serial No. 98-47).

Apr. 26, 1984.—Open 9:00 a.m. Subcommittee on Hospitals and Health Care. VA medical research program on neurological disorders. Witnesses: Veterans Administration; Dr. Albert Sabin, Emeritus Service Professor, University of Cincinnati and Medical University of South Carolina; and Mr. Jack Powell, Paralyzed Veterans of America. (Serial No. 98-48).

May 1, 1984.—Open 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Compensation and Insurance Legislation: H.R. 4890, 5441, 5442, 5443, 5444, and 5445. Witnesses: Hon. J. Roy Rowland, Member of Congress; Veterans Administration; and veterans' organizations. (Serial No. 98-49).

May 2, 1984.—Open 9:00 a.m. Subcommittee on Hospitals and Health Care. Markup. Ordered reported as amended, H.R. 4792, 4833, and 5412. Ordered reported, H.R. 3876, 4625, 4694, 5225, and 5551.

May 3, 1984.—Open 9:00 a.m. Subcommittee on Housing and Memorial Affairs. Hearing and Markup. Legislation on VA Housing Dollar Limitations and Grave Markers. Ordered reported H.R. 4685, 4686, and 5367. Witnesses: Veterans Administration, and veterans organizations. (Serial No. 98-50).

May 8, 1984.—Open 9:00 a.m. Subcommittee on Hospitals and Health Care. VA medical research programs on prosthetics and rehabilitation. Witnesses: Veterans Administration and veterans' organizations. (Serial No. 98-51).

May 10, 1984.—Open 9:00 a.m. Full Committee. Markup. H.R. 5618, 4734, 4694, 5398, and 5617.

May 17, 1984.—Open 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Markup. Ordered reported H.R. 5441, and 5443. Ordered reported as amended, H.R. 4890, 5442, and 5444.

May 22, 1984.—Open 9:00 a.m. Full Committee. Markup. Compensation Legislation, H.R. 5688.

June 13, 1984.—Open 9:00 a.m. Subcommittee on Hospital and Health Care. VA medical research program on aging. Witnesses: Veterans Administration and veterans' organizations. (Serial No. 98-52).

June 14, 1984.—Open 9:00 a.m. Subcommittee on Compensation, Pension and Insurance. Oversight on compensation programs. Witnesses: Veterans Administration and veterans' organizations. (Serial No. 98-53).

June 27, 1984.—Open 8:30 a.m. Subcommittee on Oversight and Investigations. Vietnam era GI bill delimiting date. Witnesses: Hon. Barney Frank, Member of Congress; Veterans Administration; and veterans' organizations. (Serial No. 98-54).

July 12, 1984.—Open: 7:30 p.m. Subcommittee on Hospitals and Health Care. Springfield High School, Springfield, Pennsylvania. Quality and quantity of VA health care for veterans in southeastern Pennsylvania. Witnesses: Veterans Administration; veterans organizations; and public witnesses. (Serial No. 98-55)

Aug. 13, 1984.—Open: 4:00 p.m. Subcommittee on Hospitals and Health Care. Central-Lagrange Center, Toledo, Ohio. Quality and quantity of VA health care for veterans of northwestern Ohio. Witnesses: Veterans' Administration and veterans' organizations. (Serial No. 98-56).

Sept. 11 and 12, 1984.—Open: 8:30 a.m. Subcommittee on Oversight and Investigations. VA plans for automatic data processing, office automation, and telecommunications systems and cooperative actions with DOD. Witnesses: Veterans Administration; Department of Defense; and public witness.

Sept. 18, 1984.—Open: 9:00 a.m. Full Committee. Legislative presentation of The American Legion.

Sept. 21, 1984:—Open: 9:30 a.m. Subcommittee on Education, Training and Employment. Oversight on Public Law 98-77, Emergency Veterans' Job Training Act. Witnesses: Veterans Administration; Department of Labor; and veterans organizations. (Ser. No. 98-58).

Oct. 2, 1984:—Open: 9:00 a.m. Subcommittee on Housing and Memorial Affairs. Oversight of the National Cemetery System. Witnesses: Hon. Eldon Rudd; Hon. Rod Chandler; Hon. John McCain; Veterans Administration; and veterans organizations. (Ser. No. 98-59).

Oct. 3, 1984:—Open: 10:00 a.m. Subcommittee on Hospitals and Health Care. Centers of Disease Control study of birth defects. Witnesses: Centers for Disease Control; Agent Orange Working Group; and Office of Technology Assessment. (Ser. No. 98-60).

Nov. 14, 1984:—Open: 9:30 a.m. Subcommittee on Housing and Memorial Affairs. State Capitol, Hearing Room #2, Phoenix, Arizona. Location on a National Cemetery. Witnesses: Honorable Bob Stump; Honorable John S. McCain III; Mr. Dave Iwanski, staff assistant to Congressman Eldon Rudd; Ms. Judith Leiby, staff assistant to Senator Dennis DeConcini; State Senator William DeLong; State Representative Jim Hartdegen; Veterans Administration; Arizona Veterans Service Commission; and veterans organizations. (Ser. No. 98-61).

LEGISLATION ENACTED INTO LAW

EMERGENCY VETERANS' JOB TRAINING ACT OF 1983, PUBLIC LAW 98-77 (H.R. 2355, AS AMENDED)

Title: An act to establish an emergency program of job training assistance for unemployed Korean conflict and Vietnam-era veterans, and for other purposes.

Analysis: The purpose of this act is to address the problem of severe and continuing unemployment among veterans by providing, in the form of payments to defray the costs of training, incentives to employers to hire and train certain wartime veterans who have been unemployed for long periods of time.

ON-THE-JOB-TRAINING PROGRAM

(1) Authorizes on-the-job training in stable and permanent positions involving significant training for unemployed Korean conflict or Vietnam-era veterans who have been unemployed for at least 15 of the 20 weeks immediately preceding the date of a veteran's application for participation in the program. The VA has primary responsibility for administering the program in cooperation with the Department of Labor which has primary responsibility for promoting the development of employment and job training opportunities.

(2) Veterans with service-connected disabilities rated at 30 percent or more or at 10 percent or 20 percent if determined to have serious employment handicaps may receive up to a maximum of 15 months of training assistance. In the case of all other eligible veterans, the maximum period of training is 9 months.

(3) A program of job training approved under this Act must provide training for a period of not less than 6 months in an occupation in a growth industry, in an occupation requiring the use of new technological skills, or in an occupation for which demand for labor exceeds supply. Under certain circumstances, the Administrator may approve programs which provide training for at least 3 but less than 6 months.

(4) A veteran desiring to participate in a program of job training under this Act shall submit to the Veterans' Administration an application certifying that the veteran is unemployed and meets the other criteria for eligibility.

(5) Authorizes payment to employers to defray the cost of training, which is limited to 50 percent of the starting wage, up to a maximum of \$10,000 per veteran. Payments shall be made at the end of each 3-month period a veteran participates in an on-the-job training program. The Veterans' Administrator may make monthly payments to an employer with relatively few employees.

(6) Employers offering a program of training must make written application to the Administrator of Veterans' Affairs certifying that the employer is planning, upon a veteran's completion of training, to employ the veteran in the position for which the veteran has been trained and that the employer expects that such a position will be available on a stable and permanent basis to the veteran at the end of the training period. Listed below are some of the criteria the program offered must meet.

(a) The wages and benefits to be paid to a veteran participant are no less than those normally paid to those participating in such a program.

(b) The training content of the program is adequate to qualify a veteran for a job in the field for which training is provided and that each participating veteran will be employed full time in the program of job training, and the length of the training program is not more than that customarily required.

(c) The employer may not train a participating veteran for any job for which the veteran is already qualified.

(d) The training establishment must offer adequate space, equipment, instructional material, and instructor personnel.

(e) Adequate records will be maintained by the employer to indicate progress made by each veteran participant.

(f) No currently employed worker will be displaced and no laid-off worker will be prevented from recall due to the hiring of veterans for the program.

(g) No program will be approved which offers (a) training in seasonal, intermittent or temporary jobs; (b) training for employment under which commissions are the primary source of income; (c) training for employment involving political or religious activities; (d) training for employment with any department, agency, instrumentality, or branch of the Federal Government (including the United States Postal Service and the Postal Rate Commission), or if the program is not conducted within a State.

(7) An employer may arrange to have the training provided through an educational institution which has been approved by

guidelines already established in Chapter 34, title 38, United States Code.

(8) Enables the Veterans' Administration to ensure that no commitments are made to employers for payments that would exceed the funds appropriated under this Act. Thus, the VA may stop approving veterans' applications and issuing certificates of eligibility when that is necessary because of funding limitations. Additionally, a veteran with a certificate of eligibility may not be entered in a training program until the employer has given the VA 2 weeks notice of intention to enter the veteran into training and the VA has not advised the employer that the veteran's entry into training is not approved because adequate funds are not available.

(9) Veterans may enroll for either type of training provided in this program during the 12-month period beginning October 1, 1983, and ending September 30, 1984. No assistance would be authorized to be paid for any program commencing after December 31, 1984. In the event funds are not both appropriated and made available by the Office of Management and Budget on or before October 1, 1983, the cut-off date will be delayed correspondingly. Funding ends for all purposes on September 30, 1986.

EXPANSION OF TARGETED DELIMITING DATE EXTENSION

(10) An associate degree program which is predominantly vocational in content may be considered by the Veterans' Administrator, for purposes of section 1662(a)(3) of title 38, United States Code (Targeted Delimiting Date), to be a course with an approved vocational objective if such degree program meets the requirements established in such title for approval of such program. No more than \$25 million of the \$300 million authorized by this Act for fiscal years 1984 and 1985 may be used for pursuit of such training.

INFORMATION AND OUTREACH

(11) Requires the Administrator of Veterans' Affairs and the Secretary of Labor to conduct jointly an outreach and public information program to inform eligible veterans and employers of the job training and employment opportunities provided by this Act.

(12) The Secretary, in consultation with the Administrator, shall promote the development of job training opportunities for veterans by encouraging potential employers to make programs of job training under this Act available for eligible veterans, and by advising other appropriate Federal departments and agencies of the program established by this Act.

HOW TO APPLY

(13) Any veteran or employer interested in participating in this program should contact the Veterans' Administration Regional Office or local Public Job Service Office.

Effective date: October 1, 1983.

Cost: The Congressional Budget Office estimates the cost of this measure to be \$150 million in fiscal year 1984 and \$150 million in fiscal year 1985.

LEGISLATIVE HISTORY

Congressional Record, Vol. 129 (1983)

May 10: Ordered reported by House Committee on Veterans' Affairs.

May 13: Reported by Committee, House Report 98-116.

May 19: S. 1033 reported by Senate Veterans' Affairs Committee, Senate Report 98-132.

June 7: H.R. 2355, passed House by vote of 407 yeas to 10 nays.

June 15: H.R. 2355, amended with language of S. 1033, passed Senate.

August 2: House agrees, with amendments, to Senate amendments.

August 3: Senate concurs in House amendments to Senate amendments.

August 15: Approved by the President.

**VETERANS' HEALTH CARE AMENDMENTS OF 1983, PUBLIC LAW 98-160
(H.R. 2920, AS AMENDED)**

Title: To amend title 38, United States Code, to extend and improve various health-care and other programs of the Veterans' Administration; and for other purposes.

Summary: 1. Extends the Veterans' Readjustment Counseling program from September 30, 1984, to September 30, 1988. The 12-month period ending October 1, 1988 would be a transition for shifting the operation of the program from storefront Vet Centers into Veterans' Administration health care facilities.

2. Provides that Vietnam era veterans, and their eligible dependents, may request readjustment counseling at any time, thus eliminating a termination date for eligibility.

3. Requires that the Veterans' Administration conduct a study to be designed with particular attention to veterans with service-connected disabilities, and with specific reference to women veterans, on the prevalence and incidence of post-traumatic stress disorder (PTSD) and other psychological problems in readjusting to civilian life (collectively referred to as "post-war psychological problems") among veterans who served in the Vietnam theater of operations and the effects of such problems on these veterans.

4. Authorizes the Administrator to provide adult day health-care services through contractual arrangements with non-VA facilities, as well as in VA facilities, through fiscal year 1988. Those eligible for such care are: veterans eligible for transfer from a Veterans' Administration hospital to a community nursing home for care at VA expense; those who require adult day health care primarily for service-connected disabilities; and, veterans with service-connected disabilities rated 50 percent or more. The period of eligibility for adult day health care is generally limited to six months, except for veterans whose hospitalization was primarily for a service-connected disability. The cost of adult day health care would not be permitted to exceed the maximum permissible VA payment for nursing home care in a community facility. The Administrator may provide in-kind assistance, through the services of VA employees and the sharing of VA resources, to a facility furnishing adult day

health-care services to veterans. Any such in-kind assistance shall be provided under a contract between the VA and the facility concerned and may be provided only if the VA receives reimbursement for the full cost of such assistance.

5. The Administrator may assist a veteran by referring such veteran for placement in, and aiding such veteran in obtaining placement, a VA approved community residential-care facility if the VA is furnishing the veteran medical services on an out-patient basis or hospital, domiciliary care or nursing home care; or if the VA has furnished the veteran such care or services within the preceding 12 months.

6. Requires the Administrator of Veterans' Affairs to establish an Advisory Committee on Women Veterans. The Committee will consist of women veterans, recognized authorities in fields pertinent to the needs of women veterans, including the gender-specific health-care needs of women, and representatives of both male and female veterans with service-connected disabilities. Ex officio members shall be the Secretaries of Labor and Defense, the Chief Medical Director and the Chief Benefits Director of the Veterans' Administration, or their designees.

7. Extends the Preventive Health-Care Services Pilot Program from September 30, 1984 to September 30, 1988, and makes the program mandatory for veterans who are receiving care from the VA for their service-connected disabilities, or veterans who have service-connected disabilities rated at 50 percent or more and who are receiving care from the VA. Thus, veterans in either of these categories would be provided with at least one preventive health-care service as part of their VA care and treatment. No more than \$15 million may be expended for this program in any one fiscal year.

8. Prohibits, with the exception of veterans with service-connected disabilities or veterans receiving benefits under the improved pension program or those who must travel to VA facilities by special modes such as ambulances, payment of non-service-connected beneficiary travel payments after January 1, 1984, unless the Veterans' Administration has prescribed regulations for making determinations of inability to defray travel expenses.

9. Permits the Administrator, in order to recruit and retain certified or registered respiratory therapists, licensed physical therapists and licensed practical or vocational nurses, to set rates of pay and qualifications standards without regard to civil service laws, rules and regulations.

10. Increases, effective April 1, 1984, the Veterans' Administration per diem rate payment for the care of eligible veterans in State extended care facilities from \$6.35 to \$7.30 per day for domiciliary care; from \$12.10 to \$17.05 per day for nursing home care, and from \$13.25 to \$15.25 per day for hospital care.

11. Extends from 30 to 180 days the time that must expire after the date of reporting a proposed disposal of Veterans' Administration excess real property to the Committees on Veterans' Affairs of the House and Senate. Additionally, no property may be declared excess unless the Administrator determines such property is no longer needed to carry out the functions of the Veterans' Administration.

12. Removes the restrictions on certain property conveyed by the Veterans' Administration to the City of Biloxi, Mississippi.

13. Expresses the sense of Congress, in light of the importance of the Veterans' Administration's mission and the size of the agency, that the Administrator of Veterans' Affairs should be designated by the President as a member of the Cabinet and be the President's principal adviser on all matters pertaining to veterans, their dependents or survivors.

14. Requires the Administrator of Veterans' Affairs, through contracts or agreements with public or private agencies or persons and in consultation with the Director of the Office of Technology Assessment, to conduct an epidemiological study of the long-term adverse health effects of exposure to ionizing radiation from the detonation of nuclear devices in connection with the test of such devices or in connection with the American occupation of Hiroshima and Nagasaki, Japan during the period beginning on September 11, 1945 and ending on July 1, 1946. If the Administrator, in consultation with the Director of the Office of Technology Assessment, determines that it is not feasible to conduct a scientifically valid study, the Administrator shall promptly submit to the appropriate committees of the Congress notice of that determination and the reasons therefor. If such a determination is made, then the requirement for an epidemiological study shall cease to have effect as if repealed by law.

Reports required: 1. Not later than April 1, 1987, the Administrator shall submit to the Committees on Veterans' Affairs a report on the effectiveness of the Readjustment Counseling Program, in light of the post traumatic stress disorder study (Report 3).

2. Not later than July 1, 1987, the Administrator shall submit to the Committees on Veterans' Affairs a report on its actions and plans for the transition period for shifting the operation of the Readjustment Counseling Program from storefront Vet Centers into VA health care facilities.

3. No later than October 1, 1986, the Administrator shall submit a report to the Committees on the results of the post-war psychological problems study.

4. If the Administrator provides adult day health-care services, a report on such services must be submitted to the Congress no later than February 1, 1988 on the operation of the program during its first four years.

5. Not later than June 30, 1986, and every 3 years thereafter, the Administrator shall submit to the Committees on Veterans' Affairs a report on the adequacy of the per diem rates for care in State homes, including projections over each of the following 5 years of the demand on the Veterans' Administration for the provision of nursing home care to veterans under the auspices of the State home program.

6. Not later than December 1, 1983, the Administrator shall submit to the Committees on Veterans' Affairs a report containing the plans of the Administrator, and the reasons therefor, for meeting the health-care needs of veterans in Puerto Rico and the Virgin Islands.

7. Not later than April 1, 1984, the Administrator shall submit to the Committees on Veterans' Affairs a report on his review of the beneficiary travel program.

8. Requires the Administrator and the Director of the Office of Personnel Management to submit a joint report, not later than January 1, 1984, regarding the recommendations made in the "Study of the Feasibility and Desirability of Converting Selected Health Care Occupations to title 38, United States Code".

9. Not later than 90 days after the date of enactment of this Act, the Administrator shall submit to the Committees a report on the steps taken to promote the recruitment and retention of certified or registered therapists, licensed physical therapists and licensed practical or vocational nurses.

10. Not later than July 1, 1984, and not later than July 1 of every 2nd year thereafter, the Advisory Committee on Women Veterans shall submit to the Administrator a report on programs and activities of the Veterans' Administration pertaining to women veterans. The Administrator shall submit the report to the Congress within 60 days of receipt.

11. Not later than 1 year after date of enactment, the Administrator shall submit a report to the Congress on the development of a protocol for the ionizing radiation study. As the study progresses, periodic reports on its status are also required.

12. Not later than 90 days of enactment, the President shall submit a report on steps taken and plans made to ensure the coordination and consultation required between the Administrator and the various departments and agencies on the ionizing radiation study.

Effective date: October 1, 1983, with the exception of paragraph 10 relating to the per diem rate increases which are effective April 1, 1984.

Cost: The Congressional Budget Office estimates the cost of H.R. 2920, as amended, to be \$19.1 million in budget authority and \$15.1 million in outlays for fiscal year 1984.

LEGISLATIVE HISTORY

Congressional Record, Vol. 129 (1983)

May 10: Ordered reported by Committee on Veterans' Affairs by unanimous voice vote.

May 13: House Report 98-117.

May 23: Passed House by voice vote under suspension of the rules.

May 23: Senate Report 98-145 on S. 578.

June 28: H.R. 2920, amended with the language of S. 578, passes Senate.

November 2: House agrees to Senate amendments, with amendments.

November 3: Senate concurs in House amendments to Senate amendments.

November 21: Approved by the President.

NAMING OF VETERANS' ADMINISTRATION MEDICAL CENTERS FOR
JAMES E. VAN ZANDT AND FOR CARL VINSON, PUBLIC LAW 98-190
(H.R. 4294)

Title: To name the Veterans' Administration Medical Center in Altoona, Pennsylvania, the "James E. Van Zandt Veterans' Administration Medical Center", and to name the Veterans' Administration Medical Center in Dublin, Georgia, the "Carl Vinson Veterans' Administration Medical Center".

Summary: The Honorable James E. Van Zandt was first elected to the House of Representatives in 1938. He resigned his seat in 1943 to enter the U.S. Navy. Following World War II, he was re-elected to Congress in 1946 and served until 1963. He served as a member of the Committees on Armed Services and Veterans' Affairs.

He was 3 times elected national commander of the Veterans of Foreign Wars of the United States, and served as a member of the Advisory Committee on Cemeteries and Memorials of the Veterans' Administration. He is also a member of The American Legion and the Veterans of World War I. Mr. Van Zandt's service to veterans has been exemplary and unique, and the legislation to name the Altoona, Pennsylvania, Veterans' Administration Medical Center in his honor was sponsored by the entire Pennsylvania Congressional delegation.

James E. Van Zandt was born in Altoona, Pennsylvania on December 18, 1898. He enlisted as an apprentice seaman in the U.S. Navy in April, 1917, and retired January 1, 1959 as Rear Admiral, USNR. He saw active duty in both World Wars and in the Korean conflict.

The Honorable Carl Vinson was born in Milledgeville, Baldwin County, Georgia on November 18, 1883. He attended the Georgia Military College at Milledgeville, and was graduated from Mercer University Law School, Mason, Georgia in 1902. He was admitted to the bar in 1902 and commenced practice in Milledgeville. He served as a member of the Georgia House of Representatives from 1909 to 1912, serving as speaker pro tempore in 1911 and 1912.

He was elected to the 63rd Congress to fill the vacancy caused by the resignation of Thomas W. Hardwick. He was reelected to the 64th and 24 succeeding Congresses and served from November 3, 1914 to January 3, 1965. He did not seek reelection to the 89th Congress.

Mr. Vinson served longer in the House of Representatives than any other Member, 50 years, 1 month and 2 days. He chaired the Committee on Armed Services for 14 years, and the House Naval Affairs Committee for 16 years. Mr. Vinson died in 1981 at the age of 97 in Baldwin County, Georgia.

Effective date: Date of enactment.

Cost: The Committee estimates there would be insignificant cost associated with the enactment of H.R. 4294.

LEGISLATIVE HISTORY

Congressional Record, Vol. 129 (1983)

November 3: H.R. 4294 ordered reported by Committee on Veterans' Affairs by unanimous voice vote.

November 3: House Report 98-481.

November 8: H.R. 4294 passed House under suspension of the rules by unanimous voice vote.

November 18: H.R. 4294 passed Senate.

November 20: Approved by the President.

VETERANS' COMPENSATION AND PROGRAM IMPROVEMENTS
AMENDMENTS OF 1984, PUBLIC LAW 98-223 (S. 1388, AS AMENDED)

Title: To amend title 38, United States Code, to increase the rates of compensation for disabled veterans and the rates of dependency and indemnity compensation for survivors; to express the sense of the Congress that increases in the rates of compensation should take effect on December 1 beginning in fiscal year 1985; and for other purposes.

Analysis: (1) Increases the rates of compensation for service-connected disabilities by 3.5 percent.

(2) Increases by 3.5 percent dependency and indemnity compensation rates for surviving spouses and children of veterans who die of service-connected causes.

(3) Increases by 3.5 percent the aid and attendance allowance payable to eligible veterans and surviving spouses who require the regular aid and attendance of another person in their day-to-day activities.

(4) Increases by 3.5 percent the housebound allowance payable to eligible veterans and surviving spouses.

(5) Increases by 3.5 percent the additional amounts for dependents paid to those service-connected disabled veterans rated 30 percent or more.

(6) Increases by 3.5 percent, or from \$327 to \$338, the clothing allowance for veterans whose service-connected disabilities require the wearing or use of a prosthetic or orthopedic appliance which tends to wear or tear the clothing.

(7) Expresses the sense of Congress that future increases in rates of disability compensation and dependency and indemnity compensation shall take effect on December 1, commencing in fiscal year 1985.

(8) Provides ROTC members with eligibility for Veterans' Administration benefits for injuries incurred prior to October 1, 1982.

(9) Provides eligibility for Veterans' Administration benefits to a child adopted by a veteran, regardless of age at adoption, who became helpless prior to age 18 provided the child was a member of the veteran's household at age 18.

(10) Provides additional compensation for certain service-connected blinded veterans who also suffer service-connected hearing impairments.

(11) Adds Dysthymic Disorder (depressive neurosis) to the list of diseases of certain former prisoners of war that are presumed to be service-connected.

(12) Provides a minimum one month period of eligibility to a temporary total rating because of hospitalization in excess of twenty-one days if such hospitalization falls entirely within one calendar month.

(13) Provides discretionary authority to the Administrator and the President for expansion of the Board of Veterans' Appeals from 50 to 65 members. Also provides authority for the Chairman of the Board to designate employees to act on a temporary basis as a member of the Board.

(14) Permits VA appointed fiduciaries to be paid from beneficiaries' estates modest commissions (not to exceed 4 percent of VA payments) for fiduciary services rendered.

(15) Authorizes Veterans' Administration loan guarantees for certain manufactured housing (mobile homes) permanently affixed to a lot on the same basis as conventional homes in those jurisdictions where the manufactured home is considered to be real property.

(16) Allows restoration of Veterans' Administration loan guaranty entitlement when the property is sold by the veteran purchaser to a nonveteran and subsequently resold to an eligible veteran if the new veteran purchaser substitutes his entitlement.

(17) Authorizes the extension of the State matching grant program for establishing, expanding or improving State veterans' cemeteries, subject to appropriations, from fiscal year 1985 through fiscal year 1989. Under current law, this matching grant program would expire at the end of fiscal year 1984.

(18) Permits burial of veterans at the Springfield, Missouri Confederate Cemetery, already a part of the National Cemetery System. This will make available an additional 463 gravesites at the Springfield National Cemetery.

(19) Allows certain individuals with Vietnam era GI Bill eligibility, by virtue of pre-1977 training duty, to elect to participate in the Post-Vietnam Era Educational Assistance Program (VEAP) in lieu of receiving GI Bill benefits.

(20) Expands the definition of "special disabled veteran" for the purpose of certain employment and training initiatives to include a veteran with a service-connected disability rated at 10 or 20 percent disabling if the veteran has been determined to have a serious employment handicap.

(21) Changes membership eligibility of the VA's Special Medical Advisory Group to include individuals, other than members of specified health and allied scientific professions, who have experience pertinent to the missions of the VA's Department of Medicine and Surgery.

(22) Permits certain medical facility construction projects to be expedited by authorizing the Administrator to obligate up to \$25 million from the construction projects working reserve fund in order to undertake working drawings for certain construction projects. The expediting of such projects may occur prior to the adoption of resolutions by the House and Senate Veterans' Affairs Committees, and prior to the approval of the projects in the appropriations process.

COMPENSATION AND DIC RATES EFFECTIVE APRIL 1, 1984

	Increase (monthly rate)	
	From	To
Percentage of disability or subsection under which payment is authorized:		
(a) 10 percent	\$62	\$64
(b) 20 percent	114	118
(c) 30 percent	173	179
(d) 40 percent	249	258
(e) 50 percent	353	364
(f) 60 percent	443	459
(g) 70 percent	559	479
(h) 80 percent	648	671
(i) 90 percent	729	755
(j) 100 percent	1,213	1,255
Higher statutory awards for certain multiple disabilities.		
(k) (1) Additional monthly payment for anatomical loss, or loss of use of, any of these organs: one foot, one hand, blindness in one eye (having light perception only), one or more creative organs, both buttocks, organic aphonia (with constant inability to communicate by speech), deafness of both ears (having absence of air and bone conduction)—for each loss	62	62
(2) Limit for veterans receiving payments under (a) to (j) above	1,506	1,559
(3) Limit for veterans receiving benefits under (l) to (n) below	2,111	2,185
(l) Anatomical loss or loss of use of both feet, one foot and one hand, blindness in both eyes (5/200 visual acuity or less), permanently bedridden or so helpless as to require aid and attendance	1,506	1,599
(m) Anatomical loss or loss of use of both hands, or of both legs, at a level preventing natural knee action with prosthesis in place or of 1 arm and 1 leg at a level preventing natural knee or elbow action with prosthesis in place or blind in both eyes, either with light perception only or rendering veteran so helpless as to require regular aid and attendance	1,661	1,719
(n) Anatomical loss of both eyes or blindness with no light perception or loss of use of both arms at a level preventing natural elbow action with prosthesis in place or anatomical loss of both legs so near hip as to prevent use of prosthesis, or anatomical loss of 1 arm and 1 leg so near shoulder and hip as to prevent use of prosthesis	1,888	1,954
(o) Disability under conditions entitling veterans to two or more of the rates provided in (l) through (n), no condition being considered twice in the determination, or deafness rated at 60 percent or more (impairment of either or both ears service-connected) in combination with total blindness (5/200 visual acuity or less) or deafness rated at 40 percent or total deafness in one ear (impairment of either or both ears service-connected) in combination with blindness having light perception only or anatomical loss of both arms so near the shoulder as to prevent use of prosthesis	2,111	2,185
(p) (1) If disabilities exceed requirements of any rates prescribed, Administrator of VA may allow next higher rate or an intermediate rate, but in no case may compensation exceed	2,111	2,185

COMPENSATION AND DIC RATES EFFECTIVE APRIL 1, 1984—Continued

	Increase (monthly rate)	
	From	To
(2) Blindness in both eyes (with 5/200 visual acuity or less) together with (a) bilateral deafness rated at 30 percent or more disabling (impairment of either or both ears service-connected) next higher rate is payable, or (b) service-connected total deafness of one ear or service-connected loss or loss of use of an extremity the next intermediate rate is payable, but in no event may compensation exceed.....	2,111	2,185
(3) Blindness with only light perception or less with bilateral deafness (hearing impairment in either one or both ears is service-connected) rated at 10 or 20 percent disabling, the next intermediate rate is payable, but in no event may compensation exceed.....	2,111	2,185
(4) Anatomical loss or loss of use of three extremities, the next higher rate in paragraphs (l) to (n) but in no event in excess of.....	2,111	2,185
(q) [This subsection repealed by Public Law 90-493.]		
(r) (1) If veteran entitled to compensation under (o) or to the maximum rate under (p); or at the rate between subsections (n) and (o) and under subsection (k), and is in need of regular aid and attendance, he shall receive a special allowance of the amount indicated at right for aid and attendance in addition to such rates	906	938
(2) If the veteran, in addition to need for regular aid and attendance, is in need of a higher level of care, a special allowance of the amount indicated at right is payable in addition to (o) or (p) rate.....	1,350	1,397
(s) Disability rated as total, plus additional disability independently ratable at 60 percent or over, or permanently housebound.....	1,357	1,404
(t) Additional monthly allowance for a veteran in receipt of compensation for a disability not evaluated more than 90 percent disabling who has suffered a service-connected loss or loss of use of an extremity evaluated not less than 40 percent and has suffered a non-service connected loss or loss of use of the paired extremity evaluated at not less than 40 percent	262	271

In addition to basic compensation rates and/or statutory awards to which the veteran may be entitled, dependency allowances are payable to veterans who are rated at not less than 30 percent disabled. The rates which follow are those payable to veterans while rated totally disabled. If the veteran is rated 30, 40, 50, 60, 70, 80, or 90 percent disabled, dependency allowances are payable in an amount bearing the same ratio to the amount specified below as the degree of disability bears to total disability. For example, a veteran who is 50 percent disabled receives 50 percent of the amounts which appear below.

	Increase (monthly rate)	
	From	To
If and while veteran is rated totally disabled and—		
Has a spouse	\$74	\$77
Has a spouse and child	124	128
Has no spouse, 1 child	50	52
For each additional child	40	41
For each dependent parent	60	62
For each child age 18 to 22 attending school	112	116
Has a spouse in nursing home or severely disabled	134	139

The following increases are provided for surviving spouses of deceased veterans whose deaths are service-connected and who are receiving dependency an indemnity compensation (DIC) payments:

Pay Grade	From	To	Pay Grade	From	To
E-1	\$445	\$461	W-4	\$639	\$661
E-2	459	475	O-1	563	583
E-3	470	486	O-2	582	602
E-4	500	518	O-3	622	644
E-5	514	532	O-4	658	681
E-6	526	544	O-5	726	751
E-7	552	571	O-6	817	846
E-8	582	602	O-7	884	915
E-9	¹ 608	¹ 629	O-8	969	1,003
W-1	563	583	O-9	1,041	1,077
W-2	586	607	O-10	² 1,139	² 1,179
W-3	603	624			

¹ If the veteran served as sergeant major of the Army, senior enlisted advisor of the Navy, chief master sergeant of the Air Force, sergeant major of the Marine Corps, or master chief petty officer of the Coast Guard, the surviving spouse's rate is increased from \$655 to \$678.

² If the veteran served as Chairman of the Joint Chiefs of Staff, Chief of Staff of the Army, Chief of Naval Operations, Chief of Staff of the Air Force, or Commandant of the Marine Corps, the rate for the surviving spouse is increased from \$1,222 to \$1,265.

Increases by 3.5 percent, from \$51 to \$53 monthly, the additional DIC rate payable to surviving spouses for each child of the veteran under age 18.

Increases by 3.5 percent, from \$66 to \$68 monthly, the spouses' housebound rate.

When there is no surviving spouse receiving dependency and indemnity compensation, payment is made in equal share to the children of the deceased veteran. These rates are increased as follows:

	Increase (monthly rate)	
	From	To
One child	\$225	\$233
Two children	323	334
Three children	417	432
Each additional child	84	87

Effective Dates: Paragraphs 1-6, April 1, 1984. Paragraphs 10, 11 and 12, October 1, 1983. All remaining provisions effective on date of enactment.

Cost: The Congressional Budget Office estimates the cost of Public Law 98-223 to be \$159.2 million in outlays for fiscal year 1984; \$363.7 million in fiscal year 1985, and \$361.6 million in fiscal year 1986.

LEGISLATIVE HISTORY

Congressional Record, Vol. 129 (1983) and Vol. 130 (1984)

September 28, 1983: S. 1388, as amended, reported by Senate Veterans' Affairs Committee. S. Rept. 98-249.

November 18, 1983: S. 1388 passes Senate with an amendment.

February 8, 1984: S. 1388 passes House with an amendment in the nature of a substitute.

February 9, 1984: Senate concurs with House amendments.

March 2, 1984: Approved by the President.

EDUCATIONAL PROGRAMS ESTABLISHED BY THE DEPARTMENT OF DEFENSE AUTHORIZATION ACT OF 1984, PUBLIC LAW 98-525 (INCLUDES PROVISIONS OF H.R. 1400, AS AMENDED)

I. AMENDMENTS TO TITLE 38, UNITED STATES CODE

Establishes a new Chapter 30, Veterans Educational Assistance Act of 1984

I. Eligibility

A. Eligibility is limited to those individuals who—

1. first enter military service or enter on active duty July 1, 1985, through June 30, 1988;
2. serve at least two years of continuous active duty;
3. have received a high school diploma (or its equivalent) before completion of qualifying service;
4. are not graduates of the military academies or ROTC scholarship recipients.

B. Eligibility also includes those who as of December 31, 1989, are eligible for educational assistance benefits under Chapter 34 of Title 38, U.S. Code, (Vietnam Era GI Bill) and have served without a break in service on active duty since December 31, 1976. Those individuals in this group who are graduates of the military academies or are ROTC scholarship recipients are eligible to participate in the Chapter 30 program.

C. Unless the servicemember elects not to participate in the program, his/her basic pay will be reduced by \$100 a month for the first 12 months. A servicemember who remains on active duty during the Chapter 30 eligibility period and is eligible for educational assistance benefits under Chapter 34 of Title 38, U.S. Code, is not subject to a reduction in basic pay.

II. Basic Educational Assistance--Entitlement

A. \$300 a month for 36 months for full-time pursuit (based on 3 years of active duty or 2 years of active duty and 4 years in Selected Reserve or National Guard).

B. \$250 a month for 36 months for full-time pursuit (based on 2 years of active duty).

C. The benefit under this program (Chapter 30, title 38, U.S. Code) for a servicemember who, as of December 31, 1989, has eligibility under Chapter 34 of title 38, U.S. Code, shall be supplemented by one-half of the educational assistance allowance that would have been payable under Chapter 34. This supplement will be based on the Chapter 34 rates in effect on December 31, 1989. Such individuals may not receive benefits under Chapter 30 before January 1, 1990. Former servicemembers who commence training under Chapter 34 prior to that program's delimiting date of December 31, 1989, and who have remaining eligibility under that program when it expires, may continue in training under the new Chapter 30 and be eligible for the supplement to the Chapter 30 rates of one-half of the Chapter 34 rates until the eligibility under Chapter 34 is exhausted.

D. Paragraphs A-C paid by Veterans' Administration.

E. Increase in Basic Entitlement (basic kicker)

1. up to an additional \$400 per month;

2. targeted to individuals designated by the Secretary concerned who have a skill or specialty in which there is a critical shortage or for which it is difficult to recruit;

3. paragraph E paid by Department of Defense.

F. Effective date: July 1, 1985.

III. Discretionary Supplemental Benefit

A. \$300 a month for 36 months for full-time pursuit (based on 5 or more additional years on active duty without a break in service or 2 additional years of active duty and 4 additional years in Selected Reserve).

B. Discretionary with Secretary concerned.

C. Paid by Department of Defense.

D. Increase in Supplemental Benefit (supplemental kicker)

1. up to an additional \$300 per month;

2. targeted to individuals designated by the Secretary concerned who have skills or specialties in which there is a critical shortage of personnel.

E. Effective date: July 1, 1986.

IV. Use of Benefits

A. Members who complete at least two years of active duty service after June 30, 1985, without a break in service, may receive benefits for approved courses, including in-service enrollments.

B. Entitlement expires 10 years from date of last discharge or release from active duty or from date individual becomes entitled, whichever is later.

C. Total aggregate amount of Federal assistance under programs administered by the VA or Chapter 106 or 107 programs of title 10, U.S. Code, is limited to 48 months.

V. Administration of Program

Educational assistance provided through the Veterans' Administration.

II. AMENDMENTS TO TITLE 10, UNITED STATES CODE

Educational assistance program for members of the Selected Reserve and National Guard

I. Eligibility

A. Eligibility is limited to those individuals who

1. enlist, reenlist, or extend an enlistment, or are appointed as, or are serving as officers in the Selected Reserve, and agree to serve an additional six years;

2. have a high school diploma (or equivalent certificate) before completing active duty for training.

B. Individuals previously awarded a baccalaureate degree (or equivalent evidence of completion of study) are not eligible.

II. Educational Assistance—Enlistment

A. \$140 a month for full-time pursuit up to a maximum of 36 months.

B. Limited to courses at institutions of higher learning.

C. Paid by the Department of Defense.

III. Use of Benefits

A. No assistance provided to new members until—

1. required initial period of active duty for training completed;

2. served 180 days of service in Reserve.

B. Members who reenlist or extend their service for six additional years and have already completed their active duty for training and 180 days of service may begin to use their entitlement following reenlistment or extension during the period beginning July 1, 1985 and ending July 30, 1988.

C. Enlistment expires at the end of the 10 year period beginning on the date the individual becomes entitled to assistance or on the date separated from Reserve, whichever is first.

IV. Administration of Program

Educational assistance provided through the Veterans' Administration

V. Effective date: July 1, 1985

LEAVES OF ABSENCE

I. Authorizes the Secretary of Defense to allow certain eligible persons leaves of absence of up to two years to pursue programs of education. Those who are granted such leaves must agree to extend their current enlistment on the basis of two months for each month of the period of the leave of absence.

II. Effective date: October 1, 1985.

MISCELLANEOUS AMENDMENT AFFECTING TITLE 38 EDUCATION
PROGRAM

VEAP Enrollment

I. No individual on active duty in the Armed Forces may initially enroll in chapter 32, title 38, U.S. Code, (VEAP) during the period July 1, 1985 through June 30, 1988.

II. Effective date: Date of enactment.

Cost. Unofficial Congressional Budget Office estimates indicate the cost of the educational provisions of Public Law 98-525 to be \$2 million in outlays in fiscal year 1985; \$16 million in outlays for fiscal year 1986, and \$52 million in outlays for fiscal year 1987.

LEGISLATION HISTORY

Congressional Record, Vol. 129 (1983) and Vol. 130 (1984)

May 16, 1983: H.R. 1400 reported by Committee on Veterans' Affairs, House Report 98-185, Part 1.

April 19, 1984: H.R. 5167, the Defense Authorization Act, including provisions similar to H.R. 1400, as amended, reported by Committee on Armed Services. House Report 98-691.

June 1, 1984: H.R. 5167 passed House by a vote of 298-98.

June 21, 1984: H.R. 5167 passed Senate, as amended.

Sept. 26, 1984: Conference report on H.R. 5167, as amended. House Report 98-1080.

Sept. 26, 1984: House agreed to conference report.

Sept. 26, 1984: Senate agreed to conference report.

Oct. 3, 1984: H. Con. Res. 369 (correct enrollment of H.R. 5167) passed House.

Oct. 5, 1984: H. Con. Res. 369 passed Senate.

Oct. 19, 1984: Approved by the President.

VETERANS' HEALTH CARE ACT OF 1984,
PUBLIC LAW 98-528 (H.R. 5618, AS AMENDED)

Title: To amend title 38, United States Code, to revise and improve Veterans' Administration health programs and to improve security and law enforcement at Veterans' Administration facilities; and for other purposes.

Summary: (1) Directs the Administrator of Veterans' Affairs to prescribe regulations, including rules for conduct on Veterans' Administration property and the penalties for violations of such rules, provide for the maintenance of law and order and the protection of persons and property in buildings under the jurisdiction of the Veterans' Administration.

(2) Directs the Administrator to prescribe regulations with respect to the exercise by VA police officers of enforcement and arrest authority, the scope and duration of training required for VA police officers, and rules limiting the carrying and use of weapons by VA police officers.

(3) Expands the authority of the Administrator of Veterans' Affairs to adjust the salaries of certain personnel, in order to recruit and retain their services, to include VA police officers.

(4) Permits the Administrator to reimburse police officers for uniform expenses in an amount not to exceed \$200 in any fiscal year, or in an amount up to \$400 on a one-time only basis. The amount of the uniform allowance may be based on estimated average costs or actual costs and may vary by geographic regions.

(5) Directs the Administrator to submit to the Committees on Veterans' Affairs of the House and Senate a report on the regulations prescribed for police officers not later than 180 days after date of enactment.

(6) Clarifies the due date of the Comptroller General's opinion as to whether or not the Office of Management and Budget has provided the Veterans' Administration with the funded personnel ceiling by allowing the Comptroller General 15 days to review the Office of Management and Budget certification.

(7) Extends for one fiscal year, or until September 30, 1985, the Administrator's authority to waive restrictions placed on the provision of hospital care and medical services to eligible veterans who are residents of the Commonwealth of Puerto Rico and the Virgin Islands. The loss of this authority would place an undue hardship on the VA's ability to provide medical services in Puerto Rico and the Virgin Islands by limiting the services to the annual determined incidence of such care in the 48 contiguous States. The VA Medical Center in Puerto Rico cannot meet the demand for care in the area.

(8) Authorizes to be appropriated such sums as may be necessary for the Geriatric Research, Education and Clinical Centers (GRECCs) program through fiscal year 1985 and subsequent fiscal years.

(9) Authorizes the use of grants to States for acquiring existing facilities to be used to provide domiciliary, or nursing home care to eligible veterans, provided the cost of acquisition of existing facilities will not be greater than the estimated cost of construction of an equivalent new facility.

(10) Directs the Administrator to coordinate the provision of VA benefits and services (and information about such benefits and services) to veterans seeking VA health-care with appropriate programs (and information about such programs) conducted by State and local governmental agencies and by private entities at the State and local level, with a special emphasis on veterans who are 65 years of age or older.

(11) Permits the Administrator to furnish devices for assisting in overcoming the handicap of deafness (including telecaptioning television decoders) to any veteran who is profoundly deaf and entitled to VA compensation on account of hearing impairment.

(12) Permits the Administrator to adjust rates of pay for clinical or counseling psychologists who hold diplomas as diplomates in psychology from an accrediting authority approved by the Administrator.

(13) Grants the Administrator permanent authority to waive mandatory reductions in military retirement pay if necessary to recruit a well qualified doctor of medicine or osteopathy for a special position in the Department of Medicine and Surgery.

(14) Permits the Chief Medical Director of the Veterans' Administration to designate special programs for the treatment of post-

traumatic-stress disorder (PTSD). Any program so designated must promote the training of health-care personnel in the causes, diagnosis, and treatment of PTSD and such program should (when appropriate) be coordinated with the provision of readjustment counseling services.

(15) Directs the Chief Medical Director to establish in the Department of Medicine and Surgery a Special Committee on Post-Traumatic-Stress Disorder to assess and carry out a continuing assessment of the capacity of the VA to diagnose and treat PTSD in eligible veterans. The Special Committee shall also make recommendations to the Chief Medical Director regarding appropriate diagnostic and treatment methods, the evaluation of PTSD treatment programs, the conduct of research and the appropriate allocation of resources for such activities.

(16) Directs the Chief Medical Director to establish and operate in the Department of Medicine and Surgery a National Center on Post-Traumatic-Stress Disorder to carry out and promote the training of health-care and related personnel in, and research into the causes, diagnosis and treatment of veterans with PTSD, and to serve as a resource center for promoting and coordinating the exchange of information regarding all VA, as well as other Federal and non-Federal, PTSD research and training activities. The Administrator shall submit to the House and Senate Veterans' Affairs Committees a report on activities relating to PTSD not later than March 1, 1985.

(17) Not later than 6 months following the date of enactment of this law, the Administrator shall issue guidelines for the treatment and rehabilitation of veterans for alcohol or drug dependence or abuse disabilities and submit to the House and Senate Veterans' Affairs Committees a report on the issuance of the guidelines.

(18) Not later than September 30, 1985, the Administrator shall submit a report to the Committees on Veterans' Affairs of the House and Senate on VA programs to furnish palliative care, supportive counseling for families, and other medical services to terminally ill veterans.

(19) Directs the Administrator to carry out a study, and report to Congress, on veterans who reside in areas which are geographically remote from VA health care facilities who are eligible for PTSD health-care services, and develop alternative approaches which could be adopted to furnish health-care services to such veterans. The report must be submitted to the Committees on Veterans' Affairs of the House and Senate no later than January 1, 1986. Not later than July 1, 1986, the Administrator must submit to the Committees a report describing an experimental program in 5 remote areas which could be implemented to provide eligible veterans with health-care services.

(20) Directs the Administrator of Veterans' Affairs to permit the use of land previously conveyed for use of the University of California for medical or research facilities to be expanded to include use for educational or cultural purposes.

(21) Names the Veterans' Administration Medical Center in Murfreesboro, Tennessee for Alvin C. York.

(22) Names the Veterans' Administration Medical Center in Milwaukee, Wisconsin for Clement J. Zablocki.

Effective date: Date of enactment.

Cost: The Congressional Budget Office estimates the cost of Public Law 98-528 to be \$27.6 million in budget authority and \$22.8 million in outlays for fiscal year 1985; \$11.9 million in budget authority and \$7.7 million in outlays for fiscal year 1986, and \$9.5 million in budget authority and \$9.5 million in outlays for fiscal year 1987.

LEGISLATIVE HISTORY

Congressional Record, Vol. 130 (1984).

May 10: H.R. 5618 ordered reported by House Committee on Veterans' Affairs.

May 15: House Report 98-779.

May 21: H.R. 5618 passed House by voice vote under suspension of the rules.

May 25: S. 2514 reported by Senate Committee on Veterans' Affairs, Senate Report 98-487.

August 8: H.R. 5618 passes Senate amended with the language of S. 2514.

October 2: House agreed to Senate amendments, with amendments.

October 3: Senate concurs with House amendments.

October 19: Approved by the President.

VETERANS' DIOXIN AND RADIATION EXPOSURE COMPENSATION STANDARDS ACT, PUBLIC LAW 98-542 (H.R. 1961, AS AMENDED)

Title: An act to require the Administrator of Veterans' Affairs to prescribe regulations regarding the determination of service connection of certain disabilities of veterans who were exposed to dioxin in the Republic of Vietnam while performing active military, naval, or air service or to radiation from nuclear detonations while performing such service, to provide interim benefits for certain disabilities and deaths, and for other purposes.

Summary: (1) Public Law 98-542 provides, effective October 1, 1984, a new temporary 2-year disability (or death) payment to certain veterans (or their dependents) who served in the Republic of Vietnam who have either chloracne or porphyria cutanea tarda (PCT, a liver condition), diseases which are linked in some studies with exposure to dioxin and which become manifest within 1 year after the veteran's departure from Vietnam. The amount of benefit payment would be based on the degree of the veteran's disability, or, in the case of spouses of deceased veterans, on the veteran's rank in service. Rates would be identical to the rates of veterans' compensation or dependency and indemnity compensation. Benefits would not be payable after September 30, 1986, unless the Administrator sets forth, in regulations, the conditions under which such payments may be continued on a permanent basis.

(2) Requires that guidelines, and where appropriate standards and criteria, be issued for the adjudication of claims related to exposure to ionizing radiation or dioxin in certain circumstances. These guidelines would assist VA claims examiners in exercising sound judgment in the adjudication of such claims. The guidelines,

standards, and criteria would be promulgated after the Administrator has received the advice of a Scientific Council composed of medical and scientific authorities who have been specifically charged with the duty of advising the Administrator of Veterans' Affairs on the credibility and scientific acceptability of the evidence regarding the possible harmful effects from such exposure.

(3) Requires the Administrator to issue regulations with respect to whether service-connection shall be granted in the adjudication of individual claims for the following diseases: (A) chloracne, porphyria cutanea tarda (PCT), and soft tissue sarcoma based on exposure to dioxin; and (B) leukemia, malignancies of the thyroid, female breast, lung, bone, liver, skin, and polycythemia vera based on exposure to ionizing radiation.

(4) Requires the Administrator to issue regulations with respect to the circumstances under which service-connection shall be granted for any disease which is identified by the Scientific Council and found by the Administrator, on the basis of sound scientific or medical evidence, to have a connection to exposure to dioxin or ionizing radiation while serving on active duty.

(5) Requires the Administrator to specify in the prescribed regulations the maximum period of time-after exposure to dioxin or ionizing radiation for the development of any disease which may be service-connected.

(6) Requires the Scientific Council to advise the Administrator on the findings of scientific studies relating to the possible adverse health effects of exposure to dioxin or radiation.

(7) Requires the Administrator to issue guidelines governing the evaluation of such scientific studies. The actual evaluation of such studies shall be made by the Administrator after receiving the advice of the appropriate panel of the Scientific Council, and the Administrator's evaluations shall be published in the Federal Register.

(8) Requires the proposed regulations to be published in the Federal Register and provides for a 90-day period for public review and comment before becoming final.

(9) Requires the Department of Defense and the Defense Nuclear Agency to issue guidelines pertaining to the preparation of radiation dose estimates in connection with Veterans' Administration claims.

Effective date: Date of enactment, except for paragraph (1) which is effective October 1, 1984.

Cost: The Congressional Budget Office estimates the cost of Public Law 98-542 to be insignificant.

LEGISLATIVE HISTORY

Congressional Record, Vol. 130 (1984)

November 3, 1983: H.R. 1961, as amended, ordered reported by Committee on Veterans' Affairs.

January 25, 1984: Reported by Committee on Veterans' Affairs, House Report 98-592.

January 30: H.R. 1961, as amended, passes House under suspension of the rules.

May 22. H.R. 1961, as amended, passes Senate with language of S. 1651.

October 3: House concurs with Senate amendments, with amendments.

October 4: Senate agrees to House amendments.

October 24: Approved by the President.

VETERANS' BENEFITS IMPROVEMENT ACT OF 1984, PUBLIC LAW 98-543 (H.R. 5688, AS AMENDED)

Title: To amend title 38, United States Code, to increase the rates of disability compensation for disabled veterans and of dependency and indemnity compensation for surviving spouses and children of veterans, to increase the rates of subsistence and educational assistance allowances for veterans pursuing vocational rehabilitation programs under chapter 31 of such title and for veterans and eligible persons pursuing programs of education or training under chapter 34, 35, or 36 of such title to increase the opportunities for vocational rehabilitation of certain veterans receiving disability compensation, and to provide vocational training opportunities for certain veterans receiving pension; and for other purposes.

Summary: (1) Increases the rates of compensation for service-connected disabilities by 3.2 percent.

(2) Increases by 3.2 percent the dependency and indemnity compensation rate for surviving spouses and children of veterans who die of service-connected causes.

(3) Increases by 3.2 percent the aid and attendance allowance payable to eligible veterans and surviving spouses who require the regular aid and attendance of another person in their day-to-day activities.

(4) Increases by 3.2 percent the housebound allowance payable to eligible veterans.

(5) Increases by 3.2 percent the additional amounts for dependents paid to certain veterans.

(6) Increases by 3.2 percent, or from \$338 to \$349, the clothing allowance for veterans whose service-connected disabilities require the wearing or use of a prosthetic or orthopedic appliance which tends to wear or tear the clothing.

(7) Increases by 3.2 percent, from \$53 to \$55 monthly, the additional DIC rate payable to surviving spouses for each child of the veterans under age 18.

(8) Increases by 3.2 percent, from \$68 to \$70 monthly, the spouses' housebound rate.

COMPENSATION AND DIC RATES EFFECTIVE DECEMBER 1, 1984

	Increase (monthly rate)	
	From	To
Percentage of disability or subsection under which payment is authorized:		
(a) 10 percent	\$64	\$66
(b) 20 percent	118	122
(c) 30 percent	179	185

COMPENSATION AND DIC RATES EFFECTIVE DECEMBER 1, 1984—Continued

	Increase (monthly rate)	
	From	To
(d) 40 percent	258	266
(e) 50 percent	364	376
(f) 60 percent	459	474
(g) 70 percent	579	598
(h) 80 percent	671	692
(i) 90 percent	755	779
(j) 100 percent	1,255	1,295
Higher statutory awards for certain multiple disabilities.		
(k) (1) Additional monthly payment for anatomical loss, or loss of use of, any of these organs: one foot, one hand, blindness in one eye (having light perception only), one or more creative organs, both buttocks, organic aphonia (with constant inability to communicate by speech), deafness of both ears (having absence of air and bone conduction)—for each loss	62	62
(2) Limit for veterans receiving payments under (a) to (j) above	1,559	1,609
(3) Limit for veterans receiving benefits under (l) to (n) below	2,185	2,255
(l) Anatomical loss or loss of use of both feet, one foot and one hand, blindness in both eyes (5/200 visual acuity or less), permanently bedridden or so helpless as to require aid and attendance	1,559	1,609
(m) Anatomical loss or loss of use of both hands, or of both legs, at a level preventing natural knee action with prosthesis in place or of 1 arm and 1 leg at a level preventing natural knee or elbow action with prosthesis in place or blind in both eyes, either with light perception only or rendering veteran so helpless as to require regular aid and attendance	1,719	1,774
(n) Anatomical loss of both eyes or blindness with no light perception or loss of use of both arms at a level preventing natural elbow action with prosthesis in place or anatomical loss of both legs so near hip as to prevent use of prosthesis, or anatomical loss of 1 arm and 1 leg so near shoulder and hip as to prevent use of prosthesis	1,954	2,017
(o) Disability under conditions entitling veterans to two or more of the rates provided in (l) through (n), no condition being considered twice in the determination, or deafness rated at 60 percent or more (impairment of either or both ears service-connected) in combination with total blindness (5/200 visual acuity or less) or deafness rated at 40 percent or total deafness in one ear (impairment of either or both ears service-connected) in combination with blindness having light perception only or anatomical loss of both arms so near the shoulder as to prevent use of prosthesis	2,185	2,255
(p) (1) If disabilities exceed requirements of any rates prescribed, Administrator of VA may allow next higher rate or an intermediate rate, but in no case may compensation exceed	2,185	2,255
(2) Blindness in both eyes (5/200 visual acuity or less) together with (a) bilateral deafness rated at 30 percent or more disabling (impairment of either or both ears service-connected) next higher rate is payable, or (b) service-connected total deafness of one ear or service-connected loss or loss of use of an extremity the next intermediate rate is payable, but in no event may compensation exceed	2,185	2,255

COMPENSATION AND DIC RATES EFFECTIVE DECEMBER 1, 1984—Continued

	Increase (monthly rate)	
	From	To
(3) Blindness with only light perception or less with bilateral deafness (hearing impairment in either one or both ears in service-connected) rated at 10 or 20 percent disabling, the next intermediate rate is payable, but in no event may compensation exceed.....	2,185	2,225
(4) Anatomical loss or loss of use of three extremities, the next higher rate in paragraphs (l) to (n) but in no event in excess of.....	2,185	2,255
(q) [This subsection repealed by Public Law 90-493.]		
(r) (1) If veteran entitled to compensation under (o) or to the maximum rate under (p); or at the rate between subsections (n) and (o) and under subsection (k), and is in need of regular aid and attendance, he shall receive a special allowance of the amount indicated at right for aid and attendance in addition to such rates.....	938	968
(2) If the veteran, in addition to need for regular aid and attendance, is in need of a higher level of care, a special allowance of the amount indicated at right is payable in addition to (o) or (p) rate.....	1,397	1,442
(s) Disability rated as total, plus additional disability independently ratable at 60 percent or over, or permanently housebound.....	1,404	1,449
(t) Additional monthly allowance for a veteran in receipt of compensation for a disability not evaluated more than 90 percent disabling who has suffered a service-connected loss or loss of use of an extremity evaluated not less than 40 percent and has suffered a non-service-connected loss or loss of use of the paired extremity evaluated at not less than 40 percent.....	271	280

In addition to basic compensation rates and/or statutory awards to which the veteran may be entitled, dependency allowances are payable to veterans who are rated at not less than 30 percent disabled. The rates which follow are those payable to veterans while rated totally disabled. If the veteran is rated 30, 40, 50, 60, 70, 80, or 90 percent disabled, dependency allowances are payable in an amount bearing the same ratio to the amount specified below as the degree of disability bears to total disability. For example, a veteran who is 50 percent disabled receives 50 percent of the amounts which appear below.

	Increase (monthly rate)	
	From	To
If and while veteran is rated totally disabled and—		
Has a spouse.....	\$77	\$79
Has a spouse and child.....	128	132
Has no spouse, 1 child.....	52	54
For each additional child.....	41	42
For each dependent parent.....	62	64
For each child age 18 to 22 attending school.....	116	120
Has a spouse in nursing home or severely disabled.....	139	143

The following increases are provided for surviving spouses of deceased veterans whose deaths are service-connected and who are receiving dependency and indemnity compensation (DIC) payments:

Pay Grade	From	To	Pay Grade	From	To
E-1.....	\$461	\$476	W-4.....	\$661	\$682
E-2.....	475	490	O-1.....	583	602
E-3.....	486	502	O-2.....	602	621
E-4.....	518	535	O-3.....	644	665
E-5.....	532	549	O-4.....	681	703
E-6.....	544	561	O-5.....	751	775
E-7.....	571	589	O-6.....	846	873
E-8.....	602	621	O-7.....	915	944
E-9.....	¹ 629	¹ 649	O-8.....	1,003	1,035
W-1.....	583	602	O-9.....	1,077	1,111
W-2.....	607	626	O-10.....	² 1,179	² 1,217
W-3.....	624	644			

¹ If the veteran served as sergeant of the Army, senior enlisted advisor of the Navy, chief master sergeant of the Air Force, sergeant major of the Marine Corps, or master chief petty officer of the Coast Guard, at the applicable time designated by section 402 of this title, the surviving spouse's rate shall be \$700.

² If the veteran served as Chairman of the Joint Chiefs of the Army, Chief of Naval Operations, Chief of Staff of the Air Force, or Commandant of the Marine Corps, at the applicable time designated by section 402 of this title, the surviving spouse's rate shall be \$1,305.

When there is no surviving spouse receiving dependency and indemnity compensation, payment is made in equal shares to the children of the deceased veteran. These rates are increased as follows:

	Increase (monthly rate)	
	From	To
One child.....	\$233	\$240
Two children.....	334	345
Three children.....	432	446
Each additional child.....	87	90

(9) Establishes a pilot 4 year program of vocational training for new non-service-connected disabled veteran pension recipients for a 4 year period beginning February 1, 1985 through January 31, 1989. A new veteran pension recipient under age 50 would be required to undergo a vocational training evaluation. New veteran recipients of pension who are 50 years of age or older would be permitted to apply for vocational training under this program. If the veteran pursues vocational training, he or she would be paid the

appropriate rate of non-service-connected pension based upon income, and the Veterans' Administration would pay the tuition, books and fees for the vocational training. Veterans entering this program who thereafter lose entitlement to pension because his or her work income causes the annual income limitation to be exceeded would continue to be eligible for Veterans' Administration health care for a 3 year period following the date on which pension is terminated. No more than 2,500 veterans could be evaluated for vocational training under this program in each 12 month period.

(10) Requires the Administrator to submit a report to the Committees on Veterans' Affairs of the House and Senate, not later than April 15, 1988, on the cost effectiveness and contribution of the temporary vocational training program to veterans becoming employable and employed.

(11) Requires the Administrator, not later than 28 months following the date of enactment of this law, to report to the committees on Veterans' Affairs of the House and Senate on the results of medical examinations given to a statistically valid sampling of veterans awarded non-service-connected pensions based on their being age 65 or older.

(12) Provides that a veteran's participation in a Veterans' Administration incentive-therapy or compensated work-therapy program will not be considered a basis for denying or discontinuing a total disability rating for VA compensation or pension purposes. Income derived from such a work therapy program would continue to be counted as income for pension purposes.

(13) Establishes a pilot 4-year program, from February 1, 1985 through January 31, 1989, for trial work periods and vocational rehabilitation for certain service-connected veterans with total disability ratings due to individual unemployability who may, with additional education and training assistance, be able to obtain meaningful jobs. Counseling, placement and postplacement services will be available under this program. Protection is provided for the individual unemployability ratings of veterans who wish to participate in this program by assuring that a veteran who regains employment would not receive a reduction in compensation benefits unless the veteran has maintained employment for at least 12 consecutive months. Veterans obtaining individual unemployability ratings on or after February 1, 1985 would be required to participate in a vocational rehabilitation evaluation in order to determine whether achievement of a vocational goal is reasonably feasible.

(14) Increases from \$4,400 to \$5,000, effective January 1, 1985, the one-time automobile allowance for certain service-connected disabled veterans.

(15) Provides that a veteran may own 2 vehicles at any one time which have adaptive equipment paid for by the Veterans' Administration. A veteran may not be paid for adaptive equipment for more than 2 vehicles in a 4-year period, with a waiver of the 2-in-4 limitation if the adapted vehicle is no longer available to the veteran due to circumstances beyond his or her control.

(16) Increases, effective January 1, 1985, from \$32,500 to \$35,500 the specially adapted housing assistance grant for "wheelchair" homes.

(17) Increases, effective January 1, 1985, from \$5,000 to \$6,000 the specially adapted housing allowance grant for certain service-connected blinded veterans and service-connected disabled veterans who have suffered the anatomical loss or loss of use of both hands to make necessary adaptations to their homes.

(18) Permits the Veterans' Administration, when determining the size of certain single, institutionalized, incompetent veterans' estates, to exclude the value of his or her home from the estate unless there is no reasonable likelihood that the veteran will again reside in the home.

(19) Permits the Administrator, where necessary in order to avoid a hardship for the veteran, to waive the suspension of benefits requirement in the case of a single, institutionalized, incompetent veteran for a total of not more than 60 days during any calendar year.

(20) Provides a 10 percent increase in the rates of education and training assistance allowances under the G.I. bill, the Dependents Education program, and in the rates of subsistence allowances under the Veterans' Administration rehabilitation program for veterans with service-connected disabilities effective October 1, 1984.

GI BILL EDUCATION ASSISTANCE RATES FOR VIETNAM ERA VETERANS

"Column I	Column II	Column III	Column IV	Column V
Type of program	No dependents	One dependent	Two dependents	More than two dependents
				The amount in column IV, plus the following for each dependent in excess of two:
Institutional training:				
Full-time.....	\$376	\$448	\$510	\$32
Three-quarter time...	283	336	383	24
Half-time	188	224	255	17
Cooperative	304	355	404	23";

INSTITUTIONAL AND COOPERATIVE RATES EFFECTIVE OCTOBER 1, 1984

"Column I	Column II	Column III	Column IV	Column V
Basis	No dependents	One dependent	Two dependents	More than two dependents
				The amount in column IV, plus the following for each dependent in excess of two:
Full-time.....	\$304	\$355	\$404	\$23
Three-quarter time.....	228	266	303	18
Half-time	152	178	202	12";
				and

REHABILITATION SUBSISTENCE ALLOWANCE RATES EFFECTIVE
OCTOBER 1, 1984

"Column I"	Column II	Column III	Column IV	Column V
Type of program	No dependents	One dependent	Two dependents	More than two dependents
				The amount in column IV, plus the following for each dependent in excess of two:
Institutional training:				
Full-time.....	\$310	\$384	\$452	\$33
Three-quarter time...	233	288	339	25
Half-time.....	155	193	227	17
Farm cooperative, apprentice, or other on-job training:				
Full-time.....	271	327	377	24
Extended evaluation:				
Full-time.....	310	384	452	33
Independent living training:				
Full-time.....	310	384	452	33
Three-quarter time...	233	288	339	25
Half-time.....	155	193	227	17"

APPRENTICESHIP OR ON-JOB TRAINING RATES EFFECTIVE
OCTOBER 1, 1984

"Column I"	Column II	Column III	Column IV	Column V
Periods of training	No dependents	One dependent	Two dependents	More than two dependents
				The amount in column IV, plus the following for each dependent in excess of two:
First 6 months.....	\$274	\$307	\$336	\$14
Second 6 months.....	205	239	267	14
Third 6 months.....	136	171	198	14
Fourth and any succeeding 6-month periods.	68	101	131	14"; and

(21) Extends the Veterans' Readjustment Appointment (VRA) authority for 2 years through September 30, 1986.

(22) Increases the maximum grade level for VRA appointments from GS-7 to GS-9.

(23) Provides limited appeal rights for VRA appointees during the first year of employment.

(24) Changes the frequency for the Office of Personnel Management Report to the Congress on the VRA program from semi-annual to annual.

(25) Extends from 60 to 90 days the life of a certificate of eligibility furnished to a veteran for the Emergency Veterans' Job Training program.

(26) Extends the date of veterans to apply to participate in the Emergency Veterans' Job Training program an additional 3 months, through February 28, 1985, and extends the date by which veterans must begin training in the program an additional 6 months, through September 1, 1985. Availability of appropriated funds for the program is extended for 1 year, through September 30, 1987.

(27) Repeals Veterans' Administration reporting requirement to the Congress on deceptive advertising, sales and enrollment practices by educational institutions.

Effective date: Paragraphs 1-8, December 1, 1984. Paragraphs 9 and 13, February 1, 1985. Paragraphs 14, 16 and 17, January 1, 1985. Paragraph 20, October 1, 1984. Paragraphs 10, 11, 12, 15, 18, 19, and 21-27, date of enactment.

Cost: The Congressional Budget Office estimates the cost of Public Law 98-543 to be \$431.9 million in budget authority and \$398.9 in outlays for Fiscal Year 1985; \$533.9 in budget authority and \$532.3 in outlays for Fiscal Year 1986; and \$483.5 in budget authority and \$486.1 in outlays for Fiscal Year 1987.

LEGISLATIVE HISTORY

Congressional Record, Vol. 130 (1984)

May 22: Ordered reported by House Committee on Veterans' Affairs.

June 7: House Report 98-828.

June 18: Passed House by voice vote under suspension of the rules.

September 17: Senate Veterans' Affairs Committee reports S. 2736. Senate Report 98-604.

October 2: H.R. 5688 passes Senate amended with the language of S. 2736.

October 5: House agrees to Senate amendments, with amendments, to H.R. 5688.

October 9: Senate concurs with House amendments.

October 24: Approved by the President.

NAMING OF VETERANS' ADMINISTRATION MEDICAL CENTER AT POPLAR BLUFF, MISSOURI FOR JOHN J. PERSHING, PUBLIC LAW 98-588 (H.R. 5252, AS AMENDED)

Title: To redesignate the Veterans' Administration Medical Center located in Poplar Bluff, Missouri, as the "John J. Pershing Veterans' Administration Medical Center."

Summary: John Joseph Pershing was born on September 13, 1860 in Linn County, Mo., near the town of Laclede. He is one of Missouri's two most famous native born individuals, the other being former President Harry S. Truman. John Pershing graduated from the United States Military Academy in 1886 and served the United States and the United States Army until his death in 1948 at the Walter Reed Army Medical Center in Washington, D.C. During his

Army career, he served as an instructor at the United States Military Academy and as commandant of the university battalion at the University of Nebraska. General Pershing was made Commander of the American Expeditionary Forces in Europe during the First World War. On September 3, 1919, General Pershing was named General of the Armies, the only person to hold that rank with the exception of General George Washington, who was awarded the title posthumously in 1976.

He subsequently served as Chief of Staff of the United States Army and, following his retirement from the Army, as Chairman of the American Battle Monuments Commission. His book entitled, "My Experiences in the World War", received the Pulitzer Prize for history in 1931.

Effective date: Date of enactment.

Cost: The Committee on Veterans' Affairs estimates there would be insignificant cost associated with the enactment of this legislation.

LEGISLATIVE HISTORY

Congressional Record, Vol. 130 (1984)

October 3: H.R. 5252, as amended, passed House by voice vote.

October 10: H.R. 5252, as amended, passed Senate by voice vote.

October 30: Approved by the President.

ACTIVITIES OF THE SUBCOMMITTEES

SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS

The purpose of the Subcommittee on Oversight and Investigations is to conduct investigations, oversight, and hearings on matters coming within the legislative and oversight jurisdiction of the Committee on Veterans' Affairs. Eleven hearings were held by the Subcommittee during the 98th Congress; nine in Washington, DC, and two in field locations.

FIRST SESSION

FIELD HEARINGS IN MISSISSIPPI

On March 29, 1983, an oversight hearing was held in Jackson, MS, and on March 30, 1983, another hearing was held in Biloxi, MS. Witnesses from the Veterans' Administration, the State of Mississippi, veterans service organizations, and the public sector presented testimony on: (1) admitting practices at the Jackson and Biloxi VA Medical Centers; (2) the performance of the VA Regional Office in handling claims for benefits; and (3) the implementation of Public Law 97-37, the former Prisoners of War Act of 1981. The testimony of Biloxi also focused on the renovation and modernization of the Biloxi and Gulfport Divisions of the VA Medical Center, the Vet Center, and the need to provide educational benefits in order to enhance recruitment and retention within the Armed Forces.

STATUS OF FEDERALLY CONDUCTED AGENT ORANGE STUDIES

Public Law 96-151 mandated that the Veterans' Administration conduct an epidemiological study of Vietnam veterans exposed to Agent Orange to determine if there is an association between exposure to this herbicide and subsequent health problems. When concerns were raised about the pace and credibility of the VA-conducted study, Chairman Montgomery recommended that the Centers for Disease Control undertake the design and conduct the study.

On May 3, 1983, the Subcommittee held a hearing in order to learn the status of this epidemiological study. In addition, it was its purpose to receive an update on other on-going studies relative to Agent Orange. Witnesses representing the Centers for Disease Control of the Department of Health and Human Services, the Department of the Air Force, and the Veterans' Administration provided the Subcommittee testimony concerning the government's research efforts. In addition, testimony was also received from a representative of the Select Committee for the Study of Veterans' Affairs of the Tennessee House of Representatives, a Member of Congress, and representatives of the Agent Orange Working Group and the National Institute of Environment and Health Sciences.

REVIEW OF FEDERAL STUDIES ON HEALTH EFFECTS OF LOW-LEVEL RADIATION EXPOSURE AND IMPLEMENTATION OF PUBLIC LAW 97-72

Beginning in 1945 and continuing until 1963, the U.S. Government exploded approximately 234 nuclear weapons in the atmosphere over the American Southwest and Pacific Ocean. The Department of Defense estimates that approximately 220,000 personnel participated in those tests. Additional personnel may have been exposed while in the occupation forces in Japan after the atomic bombings of Hiroshima and Nagasaki in 1945. Many of these troops were exposed to low-level ionizing radiation which may or may not have been accurately documented with proper exposure devices or methodologies. To compound the problem, there is limited scientific understanding of the relationship between exposure to low doses of ionizing radiation and subsequent health problems.

To assist those veterans who may have been exposed to radiation and who are suffering from illnesses that may have been caused by such exposure, the Congress enacted Public Law 97-72. This law authorizes the VA to provide certain health care services to these veterans for illnesses not found to be a result of other causes.

Since 1902, when cancer was first attributed to overexposure to X-rays, the U.S. Government has spent close to \$2 billion for research on the health effects of ionizing radiation. At least 80,000 scientific papers on the subject have been published worldwide. While much has been learned about the carcinogenic effects of high doses of radiation exposure, scientists still are uncertain how to predict the effects of exposure to low doses of ionizing radiation. Given the many sources of ionizing radiation in our environment, it has become increasingly important to answer these questions for our veteran population.

This matter was the subject of a Subcommittee hearing on May 24, 1983. Witnesses included the Veterans' Administration, the Centers for Disease Control of the Department of Health and

Human Services, the Defense Nuclear Agency, a Member of Congress, and veterans service organizations.

JUDICIAL REVIEW OF VETERANS CLAIMS

Section 211(a) of title 38, United States Code states: "The decision of the Administrator on any question of law or fact under any law administered by the Veterans' Administration providing benefits for veterans and their dependents or survivors shall be final and conclusive and no other official or any court of the United States shall have the power or jurisdiction to review any such decision . . ." This bar to judicial review is of long standing but has been challenged on many occasions. Bills which would grant veterans the right to judicial review of decisions made by the Administrator have been introduced and considered in the past. However, no legislation has been enacted. The issue is far from simple. It does not limit itself to the question of whether or not the veteran is entitled to one more review of his claim. At issue is the entire nature of the VA's adjudicative process; the role of the veterans organizations in that process; the issue of attorney representation and the fees to be permitted; the nature and scope of court review to be sanctioned; and the court of jurisdiction to be authorized.

There are arguments which support retention of the current review process, as well as arguments which call for judicial review. In order to objectively evaluate those arguments, the Subcommittee held hearings on July 21 and 26, 1983. Witnesses include a Member of Congress, veterans service organizations, the American Bar Association, the Veterans' Administration, and the Administrative Conference of the United States. Many of the witnesses favored legislation which would permit judicial review of Veterans' claims; however, they differed in their opinions on how it would be implemented and the appropriate court of jurisdiction.

REPORT OF THE ASSOCIATION OF ORTHOPAEDIC CHAIRMEN ON VA HEALTH CARE

On September 27, 1983, the Subcommittee met to receive testimony on a report issued by the Association of Orthopaedic Chairmen. The group is comprised of Chairmen of the Department of Orthopedics of the medical schools of the United States. Their report contained disturbing allegations about the delivery of health care in the Veterans' Administration, especially in the field of orthopaedic care. Among the deficiencies alleged were: (1) Veterans are routinely denied treatment for long periods for lack of medical funds; (2) accomplishment of medical procedures are compromised by the imposition of employment contract provisions forced on the VA by labor organizations; and (3) veterans' lengths of stay are frequently determined by administrative and budget requirements rather than by standards of good medical practice.

The Veterans' Administration focused their testimony on these and other allegations. They issued an item-by-item response to the allegations and initiated their own survey to gather relevant data on orthopaedic services. This survey did identify potential problem situations and areas where the VA needs to work to make improvements in their services. They believe, however, that the problems

cannot be disassociated from the existence of a national shortage of orthopaedic surgeons and the resultant recruiting problems the VA faces. They were concerned to find data indicating that some of the surgical backlogs and waiting times for orthopaedic clinic appointments were unacceptable, that there is a need to increase staffing in some locations, to increase operating room time for orthopedists and to improve the lag time in obtaining equipment repairs. However, while the VA acknowledged that their orthopedic services could be improved, the Agency testified that much of the report reflected poor communication at the local level and the resulting lack of understanding of or interest in VA health care management.

Witnesses included representatives of the Veterans' Administration, the Association of Orthopaedic Surgeons, several orthopaedic surgeons, and the executive director of the National Association of VA Physicians.

ADEQUACY OF VA STANDARDS AND PROCEDURES WITH RESPECT TO FUNERAL AND BURIAL SERVICES

The adequacy of VA burial standards was questioned when newspapers reported that a navy veteran had been buried at Quantico National Cemetery in a container described as a cardboard box. This case was one of about 470 such veterans who die in VA hospitals each year and have no next of kin and no individual has been designated to arrange for their burials. Such burials are arranged by hospital personnel working with funeral directors who are paid a stipulated sum for their services. For that sum these undertakers agree to certain specific conditions, which include necessary preparation of the bodies, including embalming, casketing, and dressing the veterans.

The VA has inspection rules to assure compliance with the stipulated conditions; however, the situation which occurred at the Quantico National Cemetery illustrated that the procedures needed to be tightened up.

The Subcommittee held a joint hearing with the Senate Committee on Veterans' Affairs on November 16, 1983, in order to review the adequacy of the VA standards and procedures with respect to the funeral and burial services provided for veterans whose remains are unclaimed at VA Medical Centers. Witnesses include representatives of veterans service organizations, Members of Congress, and the Veterans' Administration. The Veterans' Administration testified that as a result of this incident, VA Medical Centers were informed that when purchasing caskets for the burial of veterans such caskets shall, as a minimum be constructed from thick, strong particle board and must be of sufficient strength to support the weight of an adult human body. Cardboard, pressed paper, or similar materials are not acceptable.

SECOND SESSION

VIETNAM-ERA GI BILL DELIMITING DATE

The GI bill was enacted to provide vocational readjustment and restore lost educational opportunities to service members whose ca-

reers have been interrupted or impeded by reason of their active duty. The benefits provided are not a bonus for service, an economic supplement, or a lifetime benefit. They give veterans an opportunity to catch up with their peers and ease the transition from military to civilian life. Vietnam-era veterans are entitled to 45 months of education or training, and they are given 10 years from the date of discharge or release from military service to use that entitlement.

On June 27, 1984, the Subcommittee held a hearing on possible extension of the delimiting date. Witnesses included a Member of Congress, veterans service organizations, and the Veterans' Administration.

VA PLANS FOR AUTOMATED DATA PROCESSING, OFFICE AUTOMATION, AND TELECOMMUNICATIONS ACTIVITIES

The mission of the Veterans' Administration is to serve America's veterans and their families and to be their principal advocate in ensuring that they receive the care, support, and recognition they have earned by serving our Nation. In support of this mission, it is the policy of the VA to acquire and use automatic data processing, office automation, and telecommunications technologies which will improve services and program management, and increase productivity.

The Committee has been very interested in the Agency's ADP planning and has followed their progress closely. On September 11, 1984, the Subcommittee on Oversight and Investigations conducted a hearing on the Department of Medicine and Surgery ADP plans and activities, including the Medical Information Resources Management Office organization and staff, and the status of the Decentralized Hospital Computer Program and the integrated hospital system. In addition, the Subcommittee received testimony about the Office of Data Management and Telecommunications organization, its support responsibilities to other departments and fiscal expenditures, and ADP plans and activities of the Department of Veterans Benefits.

A second day of hearings was held on September 12, 1984, at which time testimony was received concerning ADP sharing actions between the VA and the Department of Defense in accordance with Public Law 97-174. Testimony was received on the status of DOD's Tri-Service Medical Information System (TRIMIS). The Subcommittee was principally interested in encouraging DOD to investigate the possibilities of utilizing a computer programming language (MUMPS) that would enable the two agencies to accomplish greater sharing of medical information and, at the same time, result in cost-savings for the Federal Government.

Witnesses presenting testimony at these hearings included representatives of the Veterans' Administration, the Department of Defense, the National Association of VA Physicians, and a representative of a private computer corporation.

SUBCOMMITTEE ON HOSPITALS AND HEALTH CARE

The Subcommittee on Hospitals and Health Care has legislative and oversight responsibility for the Veterans' Administration's

health care delivery system. This health care system is the largest in the United States operated under single management.

The VA's system of medical care facilities consists of 172 medical centers, 226 outpatient clinics, 16 domiciliaries (one of which operates independently), and 105 nursing home care units. In addition, the VA contracted for approximately 62,980 episodes of hospital care in non-VA hospitals and for approximately 31,202 admissions to community nursing care facilities for the fiscal year ending September 30, 1983. Further, the VA assists in the support of veterans in 41 State domiciliaries, 42 State nursing homes, and 7 State veterans' hospitals. At the close of fiscal year 1984, the Veterans' Administration was providing psychological readjustment counseling in 136 store front Vet Centers throughout the country.

Medical care is also provided to the spouses, widows, children, and orphans of veterans who are permanently and totally disabled from diseases or injuries traceable to their service in the Armed Forces or who died as a result of service-connected disabilities. This care is provided through the Civilian Health and Medical Program of the Veterans' Administration (CHAMPVA) and is administered by the Department of Defense through the agency that administers a similar program for retirees and dependents of the uniformed services.

To carry out its legislative and oversight responsibilities, the Subcommittee on Hospitals and Health Care held 22 formal hearings during the 98th Congress, and conducted informal veteran's forums in Illinois, Minnesota and Florida.

FIRST SESSION

During the first session of the 98th Congress, the Subcommittee conducted oversight hearings and medical facility visits in the six VA medical regions which comprise the national health care delivery system of the Veterans' Administration. The purpose of this series of hearings was to receive testimony concerning the quality and quantity of health care delivered throughout the Department of Medicine and Surgery health care system, and to provide members of the Subcommittee with first-hand observations of the physical status of VA medical facilities and of staffing at these facilities, as well as their capability to provide health care to our nation's veterans.

Subcommittee Members considered that these hearings were desirable due to the broad span of developing health care demands which are or will be confronting the VA and the Congress shortly. Nationwide, the VA has estimated the increasing numbers of aging veterans will triple in the next 10 years. By 1990 alone, more than one-half of all American men over the age of 65 will be veterans. The rapidly advancing age of veterans not only places an increased demand on the VA for nursing home care but also for hospital care resulting from acute episodes of chronic illness in the older veteran. The Subcommittee wanted to learn the magnitude of this present demand, as well as what resources will be required to accommodate the future demand on the system. Subcommittee Members additionally wanted to ascertain the impact on the VA system of significant unemployment nationwide causing more veterans to

come to the VA for medical care for the first time. Also of interest was learning of other unique and changing needs of other segments of the veteran population, including the increasing numbers of women veterans which exceed 1.15 million today, and the continuing serious psychological readjustment problems experienced by many Vietnam-era veterans. Veterans' Administration provision of health care to veterans who may have been affected by exposure to the defoliant, Agent Orange, and to veterans who may have been exposed to nuclear radiation during atomic device testing or during the post-World War II occupation of Hiroshima and Nagasaki, as authorized by Public Law 97-72, was also a subject of interest. Other areas of interest were health care benefits administered to ex-prisoners of war in accordance with Public Law 97-37 and the status of the VA's medical research program.

Testimony received at the six field hearings in 1983 provided important and useful information concerning the Department of Medicine and Surgery's performance in providing the appropriate quality and quantity of health care to our nation's veterans.

It was apparent that the quality of health care delivered in VA medical facilities is excellent. Academic affiliations with medical and health care schools, medical research opportunities and recently enacted legislation improving employees salaries and working arrangements have contributed to the recruitment of quality staff for the VA health care system. It was the consensus of the hospital directors with whom Members spoke that a quality staff is the major factor in their mildly successful efforts to respond to the significant increase in demand for medical treatment by veterans during 1982 and 1983. All VA hospital staff testified that limited funding and staff (FTEE) allocations were seriously constraining the quantity of health services delivered. This situation caused hospital directors throughout the system, and particularly in the Sunbelt States, to ration care to non-service-connected disabled veterans. This was due to the fact that, historically, allocation of resources has not kept pace with the migration of the veteran population to the Sunbelt States. Medical centers in those regions are offering non-service-connected care only to the extent that funds are available rather than to the level sufficient to meet the needs of all eligible veterans. This was especially true in the delivery of ambulatory or outpatient care. Substantial new resources and staffing, as well as some redistribution of funding on a nationwide basis by the VA Central Office are required to remedy this significant problem. Additionally, new planning initiatives by Central Office planners will be needed to provide innovative near-term alternatives to traditional modalities for delivery of ambulatory care. The Subcommittee was quite impressed with the innovation displayed by the directors of the Denver and Salt Lake City VA Medical Centers in utilizing mobile clinics and a traveling health care specialist program to augment the traditional health care delivery system.

An additional personnel problem expressed by most of the medical center directors was the instability of their security forces and the present degradation of security in their facilities. VA police officer wages were generally not competitive with local security organizations and consequently substantial numbers of police employ-

ees leave the VA for better paying jobs. As a result, VA police are not well-trained and lack experience.

During visits to the North Chicago, Palo Alto and Bay Pines VA Medical Centers, the Subcommittee was shown excellent inpatient treatment modalities for Vietnam veterans for post-traumatic stress disorder. These treatment services are known as "combat units" and have proved highly successful by employing peer and individual therapy with a supportive clinical setting exclusively for Vietnam veteran patients. Hospital authorities acknowledged the success of these units, but a lack of funds limited their expansion to other facilities.

Members of the Subcommittee were also impressed with the high quality of medical, prosthetic and rehabilitation research being conducted at the various research centers visited. It was apparent to the Members that in order to be successful in these efforts, the researchers must have access to state of the art technology and equipment. Funding for this "high tech" equipment has not been at appropriate levels recently. Monies for capital investment medical equipment, such as the outstanding diagnostic tool, the Computerized Tomographic Scanner (CT) have not been adequate to equip all of the VA medical centers which require them.

The Subcommittee made the following recommendations to the Chairman of the full Committee:

1. Increase funding and staff ceiling authorization for outpatient medical services;
2. Enhance extended care and aging programs by authorizing additional funds and staff for hospital based home care teams, geriatric, research, educational, clinical centers, and adult day health care centers;
3. Upgrade new technology equipment, including Nuclear Magnetic Resonance units (MNR), Positron Electron Transformation (PET) Scanning Units, and Computerized Tomographic (CT) Scanners;
4. Enact legislation to enhance salaries and working conditions of police officers and to improve recruiting and retention of security forces; and,
5. Enact legislation to provide comprehensive treatment for post-traumatic stress disorder.

During the first session of the 98th Congress, the Subcommittee also held hearings in Washington on legislation in reference to:

1. Increasing the per diem rate payable by the Veterans' Administration to states providing domiciliary, nursing home, and hospital care to veterans in State homes;
2. VA authority to contract for certain medical service in Puerto Rico and the Virgin Islands;
3. VA health care for women veterans and legislation to establish within the Veterans' Administration an advisory committee on women veterans; and
4. Extending the Veterans' Readjustment Counseling program and requiring the Administrator to conduct a comprehensive study of the prevalence of post-traumatic stress disorder and related readjustment problems among Vietnam-era veterans. The Subcommittee also held a hearing to review the VA medical construction program.

SECOND SESSION

During the second session of the 98th Congress, the Subcommittee recommended to the full Committee that funds be included in the Fiscal Year 1985 budget to increase funding and staff for outpatient medical services and the Veterans' Readjustment Counseling Program; enhance extended care and aging programs by adding 12 hospital-based home care teams, one additional geriatric, research, educational, clinical center; establish 15 inhouse and 15 contract adult day health care centers; and, upgrade new technology equipment by procurement of two nuclear magnetic resonance units, one positron electron tranformation (PET) scanning unit. These recommendations were included in the Committee's Report to the Committee on the Budget on the Fiscal Year 1985 budget.

The Subcommittee continued its oversight of the provision of health care in Puerto Rico and the Virgin Islands; the treatment of post-traumatic stress disorder; and, conducted three oversight hearings on the VA's medical research programs on neurological disorders, prosthetics and rehabilitation, and aging continued to examine the provision of health care at selected medical facilities. An oversight hearing was also held on the Centers for Disease Control's report entitled, "Vietnam Veterans' Risks For Fathering Babies with Birth Defects."

Hearings were held on legislation to: provide comprehensive treatment services to veterans suffering from post-traumatic stress disorder; authorize the VA to provide drugs and medicines prescribed by a private physician to veterans for the treatment of compensable service-connected disabilities; enhance salaries and working conditions of VA police officers and improve recruiting and retention of VA security forces.

As a result of Subcommittee efforts, the Veterans' Readjustment Counseling Program (Vet Centers) was extended through September 30, 1988, and the number of such Centers will be increased in fiscal year 1985 to a total of 188, an increase of 52 from the present 136. Legislation was enacted into law which: (1) Provides for enhanced law and order and protection of persons and property in buildings under the jurisdiction of the Veterans' Administration; (2) makes permanent the authorization for appropriation of such sums as may be necessary for the Geriatric Research, Education and Clinical Centers (GRECCs) program; (3) authorizes the use of grants to States for acquiring existing facilities to be used to provide domiciliary or nursing home care to eligible veterans; (4) permits the Administrator to furnish devices for assisting in overcoming the handicap of deafness; (5) permits the Administrator to adjust rates of pay for clinical or counseling psychologists who hold diplomas as diplomates in psychology from an accrediting authority approved by the Administrator; (6) permits the Chief Medical Director of the Veterans' Administration to designate special programs for the treatment of post-traumatic stress disorder and establish within the Department of Medicine and Surgery a Special Committee on Post-Traumatic Stress Disorder and a National Center on Post-Traumatic Stress Disorder; (7) requires the Administrator to submit a report to the Committees on Veterans' Affairs of the House and Senate on VA programs to furnish palliative

care, supportive counseling for families, and other medical services to terminally ill veterans; and (8) requires the Administrator to carry out a study, and report to Congress, on veterans who reside in areas which are geographically remote from VA health care facilities who are eligible for VA health care services, and develop alternative approaches which could be adopted to furnish health care services to such veterans.

During the 99th Congress, the Subcommittee plans to continue monitoring the quality and quantity of health care delivered by the VA, the Veterans' Readjustment Counseling Program, and the program of treatment for post-traumatic stress disorder. The Subcommittee will also look into the VA's plans for providing sufficient resources and staff to care for the rapidly aging veteran population, as well as alternative methods to provide such care.

SUBCOMMITTEE ON COMPENSATION, PENSION AND INSURANCE

During the 98th Congress, the Subcommittee held seven legislative hearings, three executive (mark-up) sessions and three oversight hearings.

FIRST SESSION

The Subcommittee held a legislative hearing on April 6, 1983 on legislation to permit an expansion of the number of members of the Board of Veterans Appeals. The maximum number of members has been capped at fifty since 1946 and in recent years the volume of appeals has exceeded the capacity of the Board to dispose of them on a timely basis.

H.R. 2931, a proposal to provide a cost-of-living increase in compensation and DIC, was the subject of a legislative hearing on April 19, 1983.

Two days of legislative hearings were held on April 26 and April 27, 1983 on H.R. 1961, a bill to provide benefits for possible adverse health effects of veterans which may be the result of exposure to dioxin in the herbicide Agent Orange while serving in Southeast Asia during the Vietnam era.

An executive session was held on May 4, 1983 to mark up legislation pertaining to a cost-of-living increase in compensation and DIC and to provide for authority to expand the number of members on the Board of Veterans Appeals. An amendment to the compensation COLA bill was adopted to include a modification to the compensation eligibility criteria for blinded veterans.

On July 12, 1983, another legislative hearing was held on H.R. 1961.

An executive session was held on July 28, 1983 to mark up the bill H. R. 1961. During this executive session, an amendment in the nature of a substitute was adopted which provided a 20-year time limit for manifestation of soft-tissue sarcoma and a one-year limit for manifestation of chloracne and porphyria cutanea tarda. The Subcommittee recommended the bill, as amended, to the full Committee.

H.R. 1918, a bill to provide a service pension for veterans of World War I and their widows was the subject of a legislative hearing on August 2, 1983. Testimony was presented at this hearing

that the fiscal year 1984 cost of this bill, if enacted, would be \$1.39 billion.

An oversight hearing on the compensation program was held on September 22, 1983. A substantial amount of attention was given by service organization witnesses to possible changes in the DIC rate structure for widows. As a result of this hearing, the VA agreed to secure data from VA claims folders pertaining to the percentage of service-connected disability ratings in effect during the lifetime of veterans whose widows have recently become eligible for DIC.

On October 4, 1984 an oversight hearing was held on the VA's insurance programs. The VA witness reported consideration was being given to a plan to cap the term policy premiums at the age 70 rate.

SECOND SESSION

A legislative hearing was held on May 1, 1984 on a number of bills affecting the compensation and pension programs, including a cost-of-living increase in compensation and DIC, an increase in the maximum coverage in Servicemen's Group Life Insurance, and refinements of the compensation program. A new and innovative proposal was introduced in H.R. 5442 to provide VA sponsored vocational training for younger disabled pensioners. The costs of tuition, books, and fees would be paid by the VA. No subsistence allowance would be paid but the veteran would be paid pension according to his entitlement under Chapter 15 of title 38, United States Code. Testimony was presented that indicated the program would result in a net savings by the end of the third or fourth year because the veterans would no longer be on the pension rolls. At the same time, veterans who completed the program would be gainfully employed and be productive members of society.

An executive session was held on May 17, 1984 to mark up legislation considered on May 1, 1984. H.R. 5444 was amended to provide for establishing an Advisory Committee on Ionizing Radiation. An amendment to H.R. 4890 was adopted to provide that a veteran could be reimbursed for automotive adaptive equipment on a second car provided he or she had divested title to a previously adapted vehicle. The Subcommittee recommended H.R. 5444 as amended, H.R. 4890 as amended, H.R. 5443, H.R. 5441 and H.R. 5442 to the full Committee.

On June 14, 1984 the Subcommittee conducted an oversight hearing on the compensation program. The issue of restructuring DIC rates for widows continued to be of substantial interest. VA reported they would be able in the near future to provide cost estimates on legislation providing rates for surviving spouses based on the level of service-connected disability of veterans during their lifetime. It is anticipated legislation of this type will be sought by several veterans' organizations in the 99th Congress.

SUBCOMMITTEE ON EDUCATION, TRAINING AND EMPLOYMENT

The Subcommittee on Education, Training and Employment has jurisdiction over programs contained in title 38, United States Code, as follows: All-Volunteer Force educational assistance pro-

gram in Chapter 30; training and rehabilitation for veterans with service-connected disabilities in Chapter 31; Post-Vietnam Era veterans' educational assistance in Chapter 32; the Vietnam Era GI Bill in Chapter 34; and survivors and dependents' educational assistance in Chapter 35. In addition, the Subcommittee has jurisdiction over job counseling, training, and placement services for veterans in Chapter 41; employment and training of disabled and Vietnam-era veterans in Chapter 42; and veterans employment rights in Chapter 43. The Subcommittee also has oversight responsibility for education, training, and employment programs which affect veterans, such as veterans' preference in Federal employment, but come under the legislative jurisdiction of other Committees.

During the 98th Congress, 10 hearings were held by the Subcommittee on Education, Training and Employment. In addition to legislative hearings, the Subcommittee reviewed the application, administration, and effectiveness of the laws passed by the Congress which come under the legislative and oversight jurisdiction of the Subcommittee and determined if the laws and programs were being implemented in accordance with the intent of Congress. Additionally, the necessity for new programs was carefully reviewed by the Subcommittee.

FIRST SESSION

A major priority of the Subcommittee during the first session was the development of a program to assist the hundreds of thousands of veterans who were unemployed. In January of 1983, over 883,000 veterans were looking for work and as many as 217,000 Vietnam veterans between the ages of 25 and 34 had been unemployed for 15 weeks or longer. In the 97th Congress, legislation had been enacted to enhance veterans employment and training programs in the Department of Labor and Veterans' Administration. This legislation went a long way toward strengthening education programs and providing an improved and more effective program of on-the-job training and job placement for unemployed and underemployed veterans. Economic realities, however, dictated that the Congress had to do even more to insure that the veterans of this country did not join the ranks of the permanently dependent.

On February 23, 1983, the Subcommittee held a hearing to review existing employment and training programs, with special emphasis on on-the-job training, to determine if changes in existing programs would make them more attractive to veterans and employers or if the situation was such that an entirely new program was necessary. Testimony was received at this hearing from the Administrator of the Veterans' Administration, the Assistant Secretary of Labor for Veterans' Employment, and representatives of veterans organizations. Subsequent to that hearing, Mr. Leath, chairman of the Subcommittee, introduced H.R. 2355, the Emergency Vietnam Veterans Job Training Act of 1983, which authorized a 2-year emergency Vietnam veterans job training program. A hearing was held on this legislation by the Subcommittee on April 19, 1983. Witnesses at this hearing included representatives of the Veterans' Administration, the Department of Labor, veterans organizations, the National Association of State Approving Agencies,

and the Interstate Conference of Employment Security Agencies, Inc. The full Committee ordered H.R. 2355 reported on May 10, 1983, and the House passed this bill on June 7, 1983. On August 15, 1983, the President signed H.R. 2355, amended, now referred to as Public Law 98-77, the Emergency Veterans' Job Training Act of 1983.

Another principal legislative objective of the first session was legislation to establish a new educational assistance program for veterans and members of the armed services. The Subcommittee also reviewed the Veterans Educational Assistance Program (VEAP). During the 97th Congress, these two programs were the subject of a total of 19 hearings by this Subcommittee and the Subcommittee on Military Personnel and Compensation of the Armed Services Committee. Both committees reported H.R. 1400, the Veterans Educational Assistance Act of 1981, in the 97th Congress but the Congress ended before the full House could act on the legislation.

On April 12, 1983, the Subcommittee met to consider four bills, including H.R. 1400, the Veterans Educational Assistance Act of 1983, introduced by the chairman of the Committee, Mr. Montgomery. Witnesses at this hearing included representatives of the Veterans' Administration, the Department of Defense, the uniformed services, military associations and veterans organizations. Subsequent to this hearing, the Subcommittee recommended and the full Committee ordered H.R. 1400 reported on May 10, 1983. Further action was taken on this legislation during the second session of the 98th Congress. This will be discussed in the section in this report dealing with the second session.

Anticipating necessary legislative changes, the Subcommittee met on September 29, 1983, to review two programs which have been crucial to the successful readjustment of millions of Vietnam-era veterans. The first program was the Veterans Readjustment Appointment program (VRA). A VRA appointment is a noncompetitive appointment of a Vietnam-era veteran with not more than 14 years of education to a Federal civilian job which leads to competitive status and career or career-conditional tenure upon satisfactory completion of 2 years of service and education or training. A service-connected disabled veteran of the Vietnam era is not subject to the educational limitation. The VRA authority was scheduled to expire September 30, 1984, and it was the intent of the Subcommittee to determine if the program should be continued and, if so, should it be changed in any way to make it more effective.

The second program under consideration was the Vietnam Era GI bill. The Subcommittee requested a number of witnesses to provide information regarding the adequacy of the current level of educational payments made under the Vietnam Era GI Bill. GI bill benefits had last been increased by Public Law 96-466, which provided a two-step increase, 5 percent effective October 1, 1980, and another 5 percent effective January 1, 1981. Further action was taken by the Subcommittee on these programs during the second session of the 98th Congress. This will be discussed in the section in this report dealing with the second session.

In addition to legislative responsibilities, the Subcommittee has oversight responsibilities for education, training, and employment

programs which affect veterans, including those that come under the legislative jurisdiction of other Committees. The first such hearing was held on March 23, 1983, when the Subcommittee met to review the Small Business Loan Program for veterans within the Small Business Administration to determine if action had been taken to help veterans obtain SBA loans. During the 97th Congress, Public Law 97-72 authorized a small business loan program for veterans to be administered and funded by the Veterans' Administration, but the Administration failed to request the funds to implement the program. As an alternative, the 97th Congress earmarked \$25 million in the Small Business Administration budget specifically for direct loans for veterans, with an additional \$3 million provided for outreach to veterans. The Subcommittee was alarmed when on February 1, 1983, the President transmitted to the Congress a proposed deferral of budget authority for business loans, including the \$25 million appropriated by the Congress for direct loans for veterans. This deferral was disapproved by the House on March 10, 1983, thereby releasing the funds. This action by the President concerned members of the Subcommittee who feared that it might indicate a lack of commitment to this veteran program on the part of the Administration. Witnesses at this hearing included representatives of the Small Business Administration, the Veterans' Administration, and veterans organizations.

On April 7, 1983, the Subcommittee conducted an oversight hearing on employment of veterans in the Federal Government. Included was a review of the provisions of the Veterans' Preference Act of 1944, as amended, the Veterans' Readjustment Appointment (VRA) program, and other provisions of title 5, U.S. Code, and title 38, U.S. Code, which relate to the employment of veterans in the Federal Government. Particular attention was given to proposed changes in regulations regarding retention rights as they may impact on veterans preference laws or in any way reduce the effect of veterans preference in a reduction in force. Those testifying at this hearing included representatives of the Office of Personnel Management and veterans organizations.

The Subcommittee also has the responsibility to conduct oversight hearings on programs within its legislative jurisdiction. On July 14, 1983, the Subcommittee met to review a most important program for service-connected disabled veterans, the vocational rehabilitation program administered by the Veterans' Administration. The Congress has always placed the vocational rehabilitation program among its highest priorities. Because of Congress' deep concern that disabled veterans should receive all possible assistance to help them overcome employment handicaps resulting from military service, two studies were mandated by the Congress regarding the vocational rehabilitation program. Subsequent to these studies, the Congress amended and updated this program as provided in Public Law 96-466. As pointed out in that law, the purpose of the vocational rehabilitation program is to provide for all service and assistance necessary to enable veterans with service-connected disabilities to achieve maximum independence in daily living and, to the maximum extent feasible, to become employable and to obtain and maintain suitable employment. The purpose of the oversight hearing was to determine if the Veterans' Administration

had taken the necessary steps to fulfill these mandates. Representatives of the Veterans' Administration and veterans organizations testified at this hearing.

SECOND SESSION

Three issues were the subject of hearings by the Subcommittee during the second session. First was the continuing evaluation of the administration and implementation of the Emergency Veterans Job Training Act of 1983, Public Law 98-77. The Subcommittee met in San Diego, CA on January 12, 1984, to evaluate actions taken at the grassroots level to promote the program and to review the application of the implementation procedures as designed in the central office of the Veterans' Administration. Witnesses at this hearing included representatives of the Veterans' Administration, the Department of Labor, the Vietnam Veterans Leadership Program, State of California Employment Development Department, California Department of Veterans' Affairs, veterans organizations, and the Members of Congress from the San Diego area.

On April 5, 1984, the Subcommittee met again regarding the EVJTA. The program had gotten off to a very slow start and the Subcommittee wanted to know why. Veteran interest and response had been extremely high, but employer participation was disappointing. Of the \$150 million available for the fiscal year, only \$13.4 million had been expended at that point. Under consideration were several proposed legislative changes that would improve the program and additional comments and recommendations from the witnesses. Testimony at this hearing was received from representatives of the following: the Veterans' Administration; the Department of Labor; veterans organizations; Interstate Conference of Employment Security Agencies, Inc.; Employers National Job Service Committee; Vietnam Veterans Leadership Program of Massachusetts, Inc.; and Ameriserv.

The final hearing on EVJTA during this Congress was held by the Subcommittee on September 21, 1984. Witnesses at this hearing included representatives of the Veterans' Administration, Department of Labor, and veterans organizations. Employer participation in the program had improved, but the process of placing veterans in jobs was too slow. The Subcommittee was particularly interested in testimony presented by a panel of Veterans' Administration regional office directors and a panel of State Directors for Veterans Employment. These individuals worked with the program on a State level, and presented experiences and insights into the program that can only come from those involved with a program at a local level. Recommendations for further improvements were made that will be considered in the 99th Congress.

Subsequent to hearings held in the first session, the Subcommittee met in mark-up session on March 1, 1984. At this time, the Subcommittee recommended to the full Committee legislation to extend and improve the Veterans Readjustment Appointment (VRA) program and to increase rates in GI Bill benefits as proposed in H.R. 5398.

During the second session, the Subcommittee continued its efforts on behalf of the enactment of a GI bill for the All-Volunteer

Force. Following the reporting of H.R. 1400 by the full Committee in the first session, this bill was referred to the Committee on Armed Services, to which it was jointly referred. Hearings were held on this legislation by the Subcommittee on Military Personnel and Compensation. No further action was taken on H.R. 1400 by that Subcommittee. Subsequently, Mr. Montgomery, chairman of the full Veterans' Affairs Committee and a member of the Armed Services Committee and senior member on the Subcommittee chaired by Mr. Aspin, offered an education amendment to the Department of Defense Authorization bill. The amendment, which contained substantially the same provisions as H.R. 1400, was accepted by the Subcommittee on Military Personnel and Compensation by a vote of 12-2 as Title VII of H.R. 5167, and DOD Authorization Act, 1985. On April 4, 1984, the full Committee on Armed Services accepted the Montgomery amendment by a vote of 35-3. The House and Senate conferees on H.R. 5167 agreed on a compromise education provision which is now Title VII of Public Law 98-525. This provision, entitled the "Veterans' Educational Assistance Act of 1984," establishes a peacetime GI Bill which provides educational benefits to deserving men and women who serve in our Nation's armed forces which will greatly enhance the capability of the military to attract and retain more quality personnel. In addition the Montgomery amendment also establishes a new educational entitlement program for individuals serving in the Selected Reserve for 6 years or longer.

SUBCOMMITTEE ON HOUSING AND MEMORIAL AFFAIRS

The Subcommittee on Housing and Memorial Affairs has legislative and oversight responsibility for the Veterans' Administration guaranteed home loan program, specially adapted housing benefits, the national cemetery system, burial benefits, and the cemeteries overseas which are under the jurisdiction of the American Battle Monuments Commission.

During the 98th Congress, the Subcommittee held six legislative and oversight hearings, three field hearings, and conducted four field trips to look at the VA housing program and inspect potential sites for future national cemetery expansion.

FIRST SESSION

NATIONAL CEMETERY SYSTEM

The National Cemetery System was established within the Veterans' Administration in accordance with the National Cemeteries Act of 1973 (Public Law 93-43) enacted June 18, 1973. The system, at the present time, consists of 109 cemeteries and is administered by the Department of Memorial Affairs.

The basic mission of the Department of Memorial Affairs is threefold: First, to provide, upon request, for the interment in any national cemetery with available grave space the remains of eligible deceased service personnel and discharged veterans (together with their spouses and certain dependents) and to permanently maintain these graves; second, to mark graves of eligible personnel in national and state cemeteries, and in private cemeteries upon

proper application; and third, to administer the State Cemetery Grants Program, which provides financial assistance on a 50-50 basis to states that wish to establish, improve, or expand their state veterans' cemeteries.

On April 14, 1983, the Subcommittee held a hearing on legislation to authorize the Administrator to make contributions for construction projects on land adjacent to national cemeteries in order to facilitate safe ingress or egress; a bill to provide for a 5-year extension to permit States to apply for Federal aid in establishing, expanding or improving State veterans' cemeteries; and on the status of the national cemetery system, including available grave space in existing national cemeteries; proposed expansion plans, VA policy on columbaria for those cemeteries closed to in-ground burials; and the status of the six cemeteries currently undergoing construction or expansion.

GUARANTEED LOAN PROGRAMS

The Veterans' Administration guaranteed loan program provides housing credit assistance whereby mortgage credit needs of veterans and service personnel for the purchase of homes, condominium units, and mobile homes and/or lots, may be satisfied by private capital on more liberal terms than is generally available to nonveterans, without the assumption of undue risks by the Federal Government.

Assistance is primarily through substituting the government's guaranty on loans in lieu of the substantial downpayments, relatively short terms, and other investment safeguards applicable to conventional mortgages.

This has been a highly successful program and since its inception in 1944, veterans have received over 11.5 million home loans amounting to approximately \$220 billion.

Mortgage delinquencies and foreclosures, however, had been steadily growing as the result of the recessionary period undergone by the country in the early 1980's. Although the economy appeared to be on an upward trend, many veterans were still suffering from the effects of the long recession, and on April 21, 1984, the Subcommittee considered legislation to provide mortgage assistance to veterans with loans guaranteed by the VA in order to avoid foreclosure of such loans. At this hearing, the Subcommittee also considered legislation to permit substitution of a veteran's housing loan entitlement when the veteran-transferee is not an immediate transferee and a measure to expand the availability of loans guaranteed by the Veterans' Administration for the purchase of manufactured homes that are permanently affixed to a lot.

The high foreclosure rate continued to escalate and the Subcommittee held a hearing on October 27, 1983, dealing with the status of the loan guaranty revolving fund and whether an appropriation request would be necessary in the future to assure the continued solvency of the program. For many years, the fund had been self-generating. However, the high foreclosure rates experienced during the last several years had almost depleted this account to the point where vendee loan sales were continually necessary to finance future program obligations.

SECOND SESSION

The Fiscal Year 1985 budget contained a proposal that the Veterans' Administration no longer respond to defaults on VA guaranteed loans by acquiring foreclosed properties but rather pay all lending institutions the guaranteed portion of the loan following foreclosure. The lending institutions would then have to dispose of the property. In addition, the VA would have been required to liquidate its loan portfolio and sell all of their properties on hand. This policy change was construed as a budgetary savings.

The Subcommittee was concerned about this policy change. Although the proposal which would have become effective March 1, 1984, was put on hold, the Subcommittee held a hearing on March 15, 1984 on the proposed impact of such change. According to a CBO report, any savings would be short-lived and would ultimately create larger deficits in future years than continuing with existing policy. Increased costs of \$75-100 million as a result of increased claims payments and no revenues could have appeared as early as fiscal year 1987.

Veterans may be entitled under certain conditions to a grant from the Veterans' Administration for a "wheelchair" home, especially adapted to their needs. This grant is payable to service-connected veterans who are so severely and totally disabled so as to preclude locomotion without resort to braces, canes, crutches, or a wheelchair. Such conditions may generally require ramps, special bathroom equipment, extra large rooms, exercising facilities, and other devices which are essential to many of these veterans to enable them to live comfortably outside of a hospital.

On May 3, 1984, the Subcommittee held a hearing on legislation which would increase the specially adapted housing grants as well as increase the dollar limitations under the VA guaranteed home loan program. In addition, the Subcommittee heard testimony on legislation requiring that new gravemarkers in national cemeteries be upright. Numerous complaints had been received from areas subject to heavy snowfalls that flat markers are not visible for long periods of time and that this makes it difficult for survivors to find the graves of their loved ones. It was also stated that as national cemeteries commemorate the sacrifices of those who served, instituting an upright headstone policy would serve to enhance the dignity and beauty traditionally associated with our national cemeteries.

EXPANSION OF THE NATIONAL CEMETERY SYSTEM

Under its present structure, the national cemetery system will not be able to provide access to burial benefits for the veteran community to the degree which is consistent with the commitments, obligations, and responsibilities incumbent upon the Veterans' Administration.

The regional cemetery concept was adopted in an effort to establish an interim method of system expansion. This was done to respond to the recognized need for improvement of service through resource distribution. At that time, planners were aware of the localization of service provided by national cemeteries. In light of this knowledge, the expected end result could not have been the ul-

timate effective delivery of service to an area as large as a Standard Federal Region which comprises a number of States.

Interments in national cemeteries have generally increased each year since establishment, and during the next 15 years as the peak period of demand is approached, veteran deaths in the nation will continue to increase annually, while unoccupied gravesites in the National Cemetery System will be greatly reduced and scattered in location. The projected peak period is estimated at between the years 2000 and 2015 at which time the age 65 and over veteran group will increase from its present level of about 4 million to about 9 million people.

The Subcommittee held a hearing on October 2, 1984 to determine the direction of future expansion. This hearing was held to coincide with the proposed release of a VA study on the National Cemetery System. Although this study was not available for review, the Subcommittee is optimistic that it will be released early next year and future hearings on this subject are anticipated.

LEGISLATIVE COST SAVINGS

During the 98th Congress, H. Con. Res. 2821 directed that savings be accomplished in the VA guaranteed home loan program.

While these proposals were handled by the full Committee, it was the responsibility of the Subcommittee Chairman and its members to review and make recommendations. The Committee met the mandates set by the Budget Committee and savings in the VA loan guaranty program were accomplished through the enactment of Public Law 98-369 as follows:

The loan origination fee was raised from one-half to one percent and all such revenues are to be deposited in the Loan Guaranty Revolving fund through Fiscal Year 1987. A one percent user fee was also imposed on loans made by the Veterans' Administration to finance the sale of acquired properties.

Administrative reforms were imposed on the VA loan guaranty program by requiring the Veterans' Administration to (a) analyze loans on a case-by-case basis; (b) consider certain acquisition and disposition costs which were not previously considered in making a decision whether or not to acquire a defaulted property; and (c) stop acquiring property where it would be less costly to the Government to pay the guaranteed portion of the loan.

The law further required the Veterans' Administration to reduce the number of properties upon which VA financing is offered from the present level.

FIELD HEARINGS

On July 22, 1983 the Subcommittee held a field hearing in Sante Fe, NM, on the need for expanding the national veterans' cemetery and/or the need for a state veterans' cemetery. Additionally, the hearing focused on the VA home loan program, existing workloads and the quality of service rendered by the VA Regional Office in New Mexico.

On March 19, 1984 the Subcommittee held a field hearing in Montgomery, AL, as a follow up to a hearing held in Washington, DC on March 15, on the status of the OMB proposal that the VA

no longer acquire foreclosed properties. The purpose was to have some local input from the State of Alabama and from the VA regional office on the impact on this proposal to change the home guaranty program.

On November 14, 1984 the Subcommittee held a field hearing in Phoenix, AZ, regarding the need for a national cemetery in the State of Arizona.

OTHER ACTIVITIES OF THE COMMITTEE

REPORT ON THE BUDGET FOR FISCAL YEAR 1985

On March 8, 1984 the Committee approved a report containing its views and estimates on President Reagan's fiscal year 1985 budget and submitted it to the Committee on the Budget.

The report observed that the President's fiscal year 1985 budget for the Veterans' Administration provides for benefits and services to the country's 28.2 veterans, the 51.7 million members of their families, and the 2.4 million survivors of deceased veterans.

Budget proposals for function 700 were \$27.246 billion in budget authority and \$26.694 billion in outlays. The President proposed legislative initiatives totaling \$663 million in budget authority and \$628 million in outlays. Compensation cost-of-living increases of 3.5 percent effective April 1, 1984 and 4.3 percent effective April 1, 1985, as well as a 15 percent increase in subsistence allowances for Vietnam-era veterans and certain dependents in the education and training program and disabled veterans enrolled in the vocational rehabilitation program effective January 1, 1985, make up the major portion of the cost of this legislative program.

The Committee proposed budget totals \$27.646 billion in budget authority, which is an increase of \$399.8 million over the President's budget. Budget outlays total \$26.530 billion, an increase of \$353.4 million over the President's budget. The Committee accepted the proposed compensation cost-of-living increase, as well as the substantial increase in education and training programs and the vocational rehabilitation program.

The Committee's proposed changes to the President's proposed budget are rather comprehensive, but their costs were estimated to be rather modest, with most of the proposed increases in funds being directed to existing programs which the President's budget proposed to reduce or terminate. The Committee's recommendations are as follows:

LEGISLATIVE

[In millions of dollars]

	Estimated budget authority
Compensation and pensions:	
Private disability allowances to Vietnam veterans with certain disabilities which may be related to Agent Orange exposure, and to veterans with certain disabilities which may have been related to exposure to ionizing radiation	4.4
Increase Servicemen's Group Life Insurance maximum coverage from \$35,000 to \$50,000	0

	Estimated budget authority
Add the disease systemic lupus erythematosus to the service-connected presumption list.....	(¹)
Readjustment benefits:	
Provide vocational training and counseling for new pension recipients under age 50	3
Increase maximum automobile assistance allowance from \$4,400 to \$5,000	4
Authorize new educational benefits (H.R. 1400)	0
Extend Veterans Readjustment Appointments authority for 3 years	0
Medical care:	
Enhance recruiting and retention of VA police officers	4
Authorize waiver of dual compensation for certain VA physicians	(¹)
Authorize certain service-connected disabled veterans to receive VA drugs and medicines prescribed by a private physician	6.4
Authorize comprehensive treatment for post-traumatic stress disorder	15
Housing:	
Increase certain dollar limitations under VA housing program	(¹)
Memorial affairs:	
Require national cemetery grave markers to be upright	2.2
Authorize inclusion of certain real property in the Grafton National Cemetery	0
Total—legislative proposals	35.4

¹ insignificant.

NON-LEGISLATIVE

(Dollars in millions)

	FTEE	Estimated budget authority
Readjustment benefits:		
Additional funds for Emergency Veterans Job Training Act of 1983	0	\$75
Medical care:		
Enhance extended care and aging programs:		
(1) Add 12 hospital based home care teams	60	4.2
(2) Add 1 additional geriatric research, educational, clinical center	20	2.2
(3) Establish 15 inhouse and 15 contract adult day health care centers	110	8.0
New technology equipment upgrade:		
(1) Acquire 2 nuclear magnetic resonance units	16	7.2
(2) Acquire 1 positron emission tomography unit	5	1.7
(3) Other capital improvements or equipment upgrades	0	5.0
Outpatient staffing:		
(1) Additional outpatient funding and staff	1,000	0
(2) Additional staff for Vet Center program	220	0
Construction:		
Add VA medical center, Philadelphia, Pa., clinical addition and nursing home care unit project	0	0
Loan Guaranty Revolving Fund:		
Continue current practices in VA Loan Guaranty Program	136	108.6
Total—nonlegislative proposals	1,567	211.9

DELEGATION VISITS

SOUTH PACIFIC AND FAR EAST

During the period January 8-23, 1983, Mr. Montgomery led a delegation of Members of the Veterans' Affairs and the Armed Services committees, as well as other Members of Congress to a number of countries to conduct on-site reviews of issues related to veterans' matters and programs. The delegation visited veterans'

facilities in Hawaii, New Zealand, Australia, Malaysia, Sri Lanka, Thailand, and the Philippines.

Purpose of the trip

The primary purpose of the mission was to meet with officials in several of these countries concerning the timely delivery of benefits and services for veterans; with special emphasis on the level of benefits and services for veterans residing outside the 48 contiguous states. In this regard, the delegation visited national cemeteries and other battle monuments in Hawaii and the Philippines.

Three generations of Americans have fought in the Pacific. Many of these countries, who were our wartime allies, have veterans programs. In this regard, the delegation visited Australia to exchange views and information on their veterans programs and benefits.

Itinerary

The following is a brief recapitulation of the veterans-related activities that occurred on the trip.

Hawaii: Members received briefings on the VA Regional Office, the VA Outpatient Clinic, and the Vet Center. They also toured the Tripler Army Medical Center, in which veterans are treated on a contract basis, and the National Memorial Cemetery of the Pacific.

Pago Pago, American Samoa: Members met with Governor Coleman and officials and were briefed on veterans programs, and also talked to individual veterans requesting assistance.

New Zealand: Members received briefings on veterans programs from U.S. Embassy officials and met with New Zealand veterans organizations representatives and individual U.S. veterans.

Australia: Members were briefed on Australian veterans programs by Mr. Volker, Secretary of the Department of Veterans Affairs, and Major General Morrison, a member of its Repatriation Commission.

Malaysia, Sri Lanka, And Thailand: Members were briefed on veterans matters by U.S. Embassy officials responsible for distributing and processing veterans benefits and claims. In Thailand, the delegation was also briefed on the POW-MIA issue.

Philippines: Members were briefed on veterans programs by T. Howard Price, Director, VA Regional Office and Veterans Memorial Medical Center (VMMC), and met with President Marcos. In addition, the Members visited Corregidor and viewed a number of other war monuments.

GERMANY/LEBANON

A delegation of Members of Congress, including Members from both the House Veterans' Affairs Committee and Armed Services Committee, visited Germany and Lebanon during the period of October 28 to October 30, 1983.

The purpose of the visit was to assess the tragic bombing of the U.S. Marine Corps installation at Beirut International Airport that took the lives of 241 military personnel, review plans for greater security to protect the Marines in the future, to observe the care

being given to the wounded Marines, and to review the casualty identification procedures used at Frankfurt, Germany.

The American people had expressed great concern about the procedures used to identify those men killed, injured, or unaccounted for, and to notify their families following the tragic bombing of the Marine compound in Beirut. The members of the delegation, therefore, believed a review of these procedures was essential in an effort to determine whether the difficult tasks were being accomplished in an efficient and timely manner.

Based on information provided and the observations of the delegation, a two-step process was followed which included those procedures conducted (1) at the Casualty Identification Center (CIC) at Rhein-Main Air Base and (2) at the Army mortuary in downtown Frankfurt.

Upon receipt of remains from Beirut, personnel at the CIC began the identification process. Procedures included X-rays, pathological examination, inventory of personal effects, fingerprinting, blood typing, and comparison of antemortem and postmortem dental charts. Members of the delegation observed these tasks being performed at the CIC.

Once the work at the CIC had been completed, the remains were transferred to the Army mortuary in Frankfurt. Here the remains were cleaned and an anatomical chart constructed. The remains were then embalmed, wrapped, and placed in a transfer case for shipment back to Dover Air Force Base, Delaware.

The first remains were to be flown from Frankfurt the night of the delegation visit to the CIC (October 28, 1983). The delegation was advised that an estimated 10-20 bodies would be processed and airlifted per day until the process was complete.

Following a brief memorial ceremony at Dover AFB, the remains were inspected, and if possible, cosmetology performed and the body placed in an appropriate uniform. A Marine Corps escort was then arranged.

Aware of the concerns being expressed by the public over the length of time required for families to be notified of the status of the men serving in Lebanon, the delegation attempted to acquire specific information on procedures used in the notification process. Responsible personnel both in Beirut and Frankfurt were keenly aware of the anxiety caused by any delay in notification and were making every effort to notify the families as soon as possible. At the same time, however, a great deal of care was taken to ensure that notification was based on positive and accurate identification, a precaution that the delegation believed was essential despite the possibility of added delays.

Two means of notification were used during the time period immediately following the bombing. The first means of notification was initiated from the field at the discretion of the on-scene commander. This procedure was utilized with respect to men who could be positively identified in Beirut. This field notification of seriously injured or deceased persons was accomplished by transmittal of information from Beirut directly to Marine Corps Headquarters in Washington, D.C. Eighty or so notifications were accomplished in this manner. Field notification of the status of uninjured personnel

was conducted by means of a telephone "hotline" directly to the United States from Beirut.

The second notification method was initiated in conjunction with the identification process being conducted in Frankfurt. By using procedures such as dental chart comparisons, FBI fingerprinting, etc., a juncture in the process was reached whereby a tentative identification was made. Once this tentative identification was accomplished (usually at the CIC), efforts continued until the remains were positively identified. This positive identification normally took place at the mortuary in Frankfurt. It should be noted that the Frankfurt identification process was carried out even though an on-site identification may have been made in Beirut.

Once positive identification had taken place, the actual notification was made. Notification of the positive identification was accomplished through a communication between the mortuary in Frankfurt and Marine Corps Headquarters in Washington, D.C. The delegation was advised that the time required for transmitting the notification message was approximately 10 minutes.

The following findings and conclusions were reported by Members of the delegation.

1. After an initial briefing on the procedures and process being used to identify the remains of those killed in the Beirut bombing, the delegation toured the Casualty Identification Center at Rhein-Main Air Base. The delegation reviewed procedures being used in the identification process such as fingerprinting, blood testing, and comparing of antemortem and postmortem dental charts. These procedures were performed at Frankfurt even though an on-site identification of the remains may have been made in Beirut. These procedures helped ensure that the remains returned to the families had, in fact, been positively identified.

2. The delegation was advised that approximately 90 percent of the remains of those killed in Beirut would be identified and returned to the United States within two weeks.

3. Most members of the delegation were surprised to learn that probably no more than 10 percent of those Marines killed were wearing dog tags at the time of the bombing. Military regulations do not require that dog tags be worn at all times.

4. The Beirut bombing was a very unusual peacetime military tragedy: a large number of persons were killed at the same time and in the same place. However, the delegation was of the general opinion that responsible personnel were doing an excellent job with respect to identification and notification. The delegation observed, however, certain problem areas, such as a lack of sufficient coordination between Beirut, Frankfurt, and the United States.

5. The delegation was impressed with the dedication of the personnel carrying out these very difficult identification and notification tasks. A large percentage of these people were volunteers.

VIETNAM

The Chairman of the Committee authorized Hon. Don Edwards, senior member of the Committee, to visit Vietnam during the period December 30, 1983, to January 5, 1984. Mr. Edwards and those accompanying him visited both North and South Vietnam,

spending 4 days in Hanoi and 3 days in Ho Chi Minh City (formerly Saigon).

Purpose of mission

The primary purpose of the mission was to meet with Vietnamese officials who deal with the health problems of the citizens of Vietnam who served in the Armed forces of North and South Vietnam during the period 1961-75. In particular, the purpose was to investigate the effects of Agent Orange on the Vietnamese population and terrain. To this end, Mr. Edwards and those assisting him met with physicians, research teams, and others in Vietnam who work on the effects of Agent Orange on Vietnamese soldiers, on the population in general, and on the environment. They also traveled outside Ho Chi Minh City to an area that had been sprayed extensively with Agent Orange.

Itinerary

December 29, 1983.—Arrived Bangkok to meet with United States Embassy officials.

December 30, 1983.—Arrived in Hanoi in late afternoon.

December 31, 1983.—Met with officials of the Public Health and Foreign Affairs Ministries and visited a hospital where we were briefed by physicians and scientists specializing in the epidemiology of birth defects.

January 1, 1984.—Met with scientists at the University of Hanoi who specialized in animal ecology and the environment. Toured the countryside west of Hanoi.

January 2, 1984.—Met with Foreign and Deputy Foreign Ministers, and the Minister of Social Welfare on veterans' programs.

January 3, 1984.—Departed Hanoi for Ho Chi Minh City.

January 3-5, 1984.—Toured the defoliated forest area in the Ma Da District, Dong Nai Province, which had been heavily sprayed by Agent Orange and other chemicals. Visited a hospital for women in Ho Chi Minh City. Visited local and city officials in Ho Chi Minh City.

January 5, 1984.—Departed Ho Chi Minh City for Bangkok.

January 6, 1984.—Met with Ambassador Dean and U.S. Embassy staff. Later visited with the Deputy Foreign Minister and the Secretary General of the National Security Council of Thailand.

Conclusions and recommendations

Following this trip, Mr. Edwards concluded that Vietnamese scientists and physicians have found exposure to Agent Orange to be a factor in the health problems of the Vietnamese female population and in their offspring. Little or no work has been done specifically on the veteran population, including the male veteran population. Recognizing that there is still much to be learned regarding the connection between exposure to Agent Orange and subsequent health problems, Mr. Edwards made the following recommendations:

1. There should be an international, non-political, scientific study conducted in the living laboratory of Vietnam itself.
2. The United States should smooth the way for the requisite study in Vietnam which will provide the basis for the resolution to

the fundamental question: "What are the effects of Agent Orange exposure on the health of the veterans who served in that country from 1961-73?"

3. There is a need to take care of our Vietnam veterans with health problems.

The entire report regarding Mr. Edwards' mission to Vietnam is available in House Veterans' Affairs Committee Print No. 48, 98th Congress 2d session.

NORMANDY, FRANCE

During the period June 2-6, 1984, the Chairman of the Committee headed a delegation of 18 Members to Normandy, France in observance of the 40th anniversary of the Battle of Normandy.

On June 6, 1944, a military force of 153,000 American, British, and Canadian soldiers launched the most massive assault of its kind ever attempted in the history of the world. Its goal was the liberation of Europe and the preservation and restoration of freedom in the western world. Few events have had such a resounding impact on the course of American and European history.

In recognition of the 40th anniversary of this historic event, the Congress approved H.J. Res. 487 (Public Law 98-311), which designated June 6, 1984, as D-Day National Remembrance. On May 31, 1984, the President issued a proclamation pursuant to Public Law 98-311, calling upon the people of the United States to commemorate the valor of those who served in the D-Day assault forces. In observance of this day, Chairman Montgomery led the delegation to France to represent the entire House of Representatives at the various 40th anniversary ceremonies and to tour the battlefields and monuments in the Normandy area, where the course of history was changed by the successful invasion on D-Day.

It should also be pointed out that the cemeteries and monuments in the Normandy area come under the jurisdiction of the Veterans' Affairs Committee. The visit also provided the opportunity to meet with officials who administer a memorial dedicating the memory of General John J. Pershing, Chief of Staff of U.S. Forces during World War I. The Pershing Memorial, which is owned by the United States Government, is located in Paris, France.

The complete report on Chairman Montgomery's mission to Normandy is available in House Veterans' Affairs Committee Print No. 81, 98th Congress, 2d Session.

SOUTHEAST ASIA

On December 6, 1984, Chairman Montgomery led a Congressional delegation to the Philippines, Vietnam, Kampuchea, Laos, and Burma. Members of the Veterans' Affairs Committee and other Members of Congress spent 10 days in Southeast Asia, including the cities of Hanoi, Ho Chi Minh City, and Phnom Penh.

The purpose of the visit was to discuss the issue of Agent Orange and the question of whether phenoxy herbicides or other defoliants used by the United States armed forces in Vietnam may have resulted in long-term adverse health effects on humans exposed to such herbicides.

Other topics discussed with top government officials included the issues of Amerasian children, emigration and negotiations on the status of individuals currently in re-education camps, and American servicemen who continue to be listed as missing-in-action from the Vietnam war.

A report regarding Mr. Montgomery's mission to Southeast Asia is available in House Veterans Affairs Committee Print No. 87, 98th Congress, second session.

STATISTICS PERTAINING TO VETERANS OF ALL WARS AND CONFLICTS SINCE 1775

NUMBER OF PARTICIPANTS AND DEATHS IN SERVICE DURING ALL WARS, AND THE POST-KOREAN CONFLICT PERIOD, AND NUMBER OF LIVING WAR VETERANS—SEPTEMBER 30, 1984

American Revolution (1775-1784)

Participants.....	290,000
Deaths in service.....	4,000
Last veteran died April 5, 1869.....	Age 109
Last dependent died April 25, 1911.....	Age 90

War of 1812 (1812-1815)

Participants.....	287,000
Deaths in service.....	2,000
Last veteran died May 13, 1905.....	Age 105
Last dependent died March 12, 1946.....	Age 89

Mexican War (1846-1848)

Participants.....	79,000
Deaths in service.....	13,000
Last veteran died September 3, 1929.....	Age 98
Last dependent died November 1, 1962.....	Age 94

Civil War (1861-1865)

	<i>Confederate</i>	<i>Union</i>
Participants.....	¹ 1,000,000	2,213,000
Deaths in service.....	¹ 133,821	364,000
Last Union veteran died August, 2, 1956.....		Age 109
Last Confederate veteran died March 16, 1958.....		Age 112

Indian Wars (approximate 1817-1898)

Participants.....	106,000
Deaths in service.....	1,000
Last veteran died June 18, 1973.....	Age 101

Spanish-American War (1898-1902)

Participants.....	392,000
Deaths in Service.....	11,000
Living veterans.....	22
Average age.....	102

World War I (1917-1918)

Participants.....	4,744,000
Average age.....	88.3
Deaths in service.....	116,000
Living veterans.....	250,000

World War II (September 16, 1940—July 25, 1947)

Participants.....	² 16,535,000
Average age	63.3
Deaths in service.....	406,000
Living veterans.....	³ 10,700,000

Korean conflict (June 27, 1950—January 31, 1955)

Participants.....	² ⁴ 6,807,000
Average age	53.9
Deaths in service.....	55,000
Living veterans.....	³ ⁵ 5,237,000

Post-Korean conflict (February 1955—August 4, 1964)

Participants.....	3,195,000
Average age	46.4
Deaths in service.....	20,000
Living veterans.....	3,037,000

Vietnam era (August 5, 1964—May 7, 1975)

Participants.....	⁴ 9,200,000
Average age	37.7
On active duty in armed forces.....	⁵ 791,000
Deaths in service.....	109,000
Deaths in civil life	226,000
Living veterans.....	⁶ 8,263,000

America's wars total through October 1, 1984 ⁷

Participants.....	⁵ 38,290,000
Deaths in service.....	1,081,000
Living war veterans	22,782,000

¹ Authoritative statistics for Confederate Forces not available. Estimated 28,000 Confederate personnel died in Union prisons.

² Includes 1,476,000 who served in both World War II and the Korean conflict.

³ Includes 1,022,000 with service in both World War II and the Korean conflict.

⁴ Includes 887,000 who served in the Korean conflict and Vietnam era.

⁵ Excludes 1,320,000 active-duty service members with no active-duty service prior to May 8, 1975.

⁶ Includes 647,000 who served in the Korean conflict and Vietnam era.

⁷ Persons who served in more than one war period are counted only once.

COST OF VETERANS' BENEFITS BY WAR

It is estimated that through Sept. 30, 1984, the VA and its predecessor agencies will have spent \$442 billion for benefits and services to veterans, their dependents and survivors. The total costs of benefits to veterans and dependents, based on the war in which the veterans served, so far are:

Veterans' service

	<i>Billions</i>
World War II.....	\$205
World War I.....	76
Vietnam War.....	74
Korean Conflict	39
Spanish-American War.....	6
Other Wars and Peacetime Service.....	41

There follows a breakdown of these expenditures by programs, services, and administrative costs by war through September 1984.

VETERANS' ADMINISTRATION AND ITS PREDECESSOR AGENCIES EXPENDITURES FROM APPROPRIATED FUNDS, BY WAR AND PURPOSE THROUGH SEPTEMBER 1984 ¹

[Thousands of dollars]

	All wars	Vietnam era	Korean conflict	World War II	World War I	Spanish-American War ²	Other wars and peacetime service
Total	441,952,629	74,117,316	39,392,460	205,488,414	76,058,355	5,926,127	40,969,957
Cash benefits.....	324,171,715	62,410,127	26,209,451	141,943,128	57,389,464	5,355,550	30,863,995
Adjusted service and dependent pay.....	56,171				56,171		
Bonus ³	3,820,079				3,820,079		
Compensation and pension total.....	229,263,217	21,609,865	19,224,665	110,405,237	49,631,070	5,322,317	23,070,063
Compensation.....		20,255,581	14,469,477	78,225,788	15,127,381		
Veterans.....		17,240,874	12,146,479	65,049,817	10,691,492		
Dependents.....		3,425,533	2,526,855	13,891,399	4,039,693		
Pension.....		943,457	4,551,331	31,464,020	34,899,885		
Veterans.....		564,520	2,681,167	20,230,118	22,090,088		
Dependents.....		378,939	1,870,164	11,233,902	12,809,797		
Insurance and indemnities.....	7,216,574	60,364	409,712	4,837,350	1,896,038		13,110
Vocational rehabilitation.....	3,886,072	1,216,579	214,055	1,644,078	645,136		166,224
Education and training.....	59,737,427	33,553,062	4,903,020	15,544,357	39,890	3,554	5,693,544
Readjustment allowance.....	3,804,875			3,804,875			
Loan guaranty.....	12,572,096	5,535,857	1,228,443	3,924,850	105,786		1,777,160
Autos, invalid lifts, etc.....	358,612	169,944	17,558	127,867	18,034	154	25,055
Homes for paraplegics, including mortgage life insurance.....	340,608	156,247	25,043	111,209	15,474		32,634
Statutory burial.....	2,655,313	71,641	166,129	1,450,781	870,693	29,476	66,592
Military and naval family allowances.....	282,083				282,083		
Clothing allowance.....	178,589	36,569	20,826	92,525	9,009	47	19,611
Services rendered ⁴	98,389,738	8,965,935	11,229,580	52,857,680	16,251,974	492,125	8,592,444
Capital additions and improvements.....	5,326,987	422,136	566,751	3,436,832	523,488	19,182	358,598
Administrative costs.....	14,064,186	2,319,116	1,386,678	7,250,774	1,893,429	59,269	1,154,920

¹ Estimates, subject to change.

² Includes Boxer Rebellion and Philippine Insurrection.

³ Adjusted Service Certificate Fund (World War I bonus) which is a trust fund established by appropriation.

⁴ Includes expenditures for the medical, hospital, and domiciliary care programs and from the Direct Loan Revolving Fund.

Note. Expenditures reflect the net amount of vouchers approved for payment rather than the amount of checks issued and differ from amounts reported to the Office of Management and Budget and Treasury Department in accordance with Budget-Treasury collection vouchers in transit between the Veterans Administration and regional disbursing offices at the close of the fiscal year.